



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ *Weekly Funding Opportunities Report* ~ \$\$\$

Friday, June 02, 2017

To: Idaho Delegates, Oregon Delegates, Washington Delegates, Tribal Chairs and Tribal Health Directors

Greetings! The NPAIHB - Funding Opportunity is provided on the basis that when there is pertinent announcements that we are made aware of, received and researched for as part of our commitment to the health and well-being of our tribal members it is posted here for you. Every Friday, new posts will be available (unless there is nothing **"New"** **Funding Opportunity Information (is provided in this color code)**).

If you have a specific targeted goal, or urgent community needs and find yourself not knowing where to start looking our assistance is available anytime, and we would be very excited to assist you. Also, at the end of this announcement there are several funding organizations that do not have deadlines and do accept proposals all year round. Thank you for your time, please do not hesitate to contact me:

Tara Fox, Grant Specialist
E-mail: tfox@npaihb.org
Office Phone: (503) 416-3274



Tribal Management Grant Program - Department of Health and Human Services/Indian Health Service

DEADLINE: Jun 30, 2017

AMOUNT: \$100,000

DESCRIPTION: The purpose of this Indian Health Service (IHS) grant announcement is to announce the availability of the TMG Program to enhance and develop health management infrastructure and assist Indian Tribes and Tribal organizations (T/TO) in assuming all or part of existing IHS programs, functions, services and activities (PSFAs) through a Title I contract and assist established Title I contractors and Title V compactors to further develop and improve their management capability. In addition, TMGs are available to T/TO under the authority of 25 U.S.C. section 5322(e) for (1) obtaining technical assistance from providers designated by the T/TO (including T/TO that operate mature contracts) for the purposes of program planning and evaluation, including the development of any management systems necessary for contract management and the development of cost allocation plans for indirect cost rates; and (2) planning, designing, monitoring, and evaluating Federal programs serving the T/TO, including Federal administrative functions.

WEBSITE/LINK: <https://www.federalregister.gov/documents/2017/05/01/2017-08775/office-of-direct-service-and-contracting-tribes-tribal-management-grant-program>



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Comprehensive Addiction and Recovery Act: Building Communities of Recovery (Short Title: BCOR) - Department of Health and Human Services/Substance Abuse and Mental Health Services Adminis

DEADLINE: Monday, July 3, 2017

AMOUNT: Up to \$200,000 per year. Up to 3 years. 13 Awards. **Cost Sharing/Match Required?: Yes** - Proposed budgets cannot exceed \$200,000 in total costs for the Federal portion (non-match, direct and indirect) in any year of the proposed project. Annual continuation awards will depend on the availability of funds, grantee progress in meeting project goals and objectives, timely submission of required data and reports, and compliance with all terms and conditions of award.

DESCRIPTION: The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT), is accepting applications for fiscal year (FY) 2017 Comprehensive Addiction and Recovery Act: Building Communities of Recovery (Short Title: BCOR). The purpose of this program is to mobilize resources within and outside of the recovery community to increase the prevalence and quality of long-term recovery support from substance abuse and addiction. These grants are intended to support the development, enhancement, expansion, and delivery of recovery support services (RSS) as well as promotion of and education about recovery. Programs will be principally governed by people in recovery from substance abuse and addiction who reflect the community served.

SAMHSA recognizes the essential role of recovery support for persons with substance abuse and addiction in order for them to maintain their overall health and wellness. SAMHSA recognizes all pathways to recovery including abstinence attained with FDA-approved medications (e.g., methadone, buprenorphine products including buprenorphine/naloxone combination formulations and buprenorphine mono-product formulations, naltrexone products including extended-release and oral formulations, disulfiram, and acamprosate calcium). Participation in evidence based clinical treatment services produces the best recovery outcomes when paired with robust recovery supports. SAMHSA expects to improve long term recovery for persons with substance abuse and addiction through the provision of individualized recovery supports and sustained support for recovery-focused community efforts. The latter is achieved by building connections between recovery networks, between Recovery Community Organizations (RCOs), and with other RSS, as well as by conducting public education and outreach on issues relating to addiction and recovery. Grantees may use funds to: 1) build connections between recovery networks, between RCOs, and with other RSS; 2) reduce the stigma associated with addiction; and 3) conduct public education and outreach on issues relating to addiction and recovery.

WEBSITE/LINK: <https://www.samhsa.gov/grants/grant-announcements/ti-17-015>



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Cooperative Agreements to Implement Zero Suicide in Health Systems

DEADLINE: Tuesday, July 18, 2017

AMOUNT: Up to \$400,000 per year for an Indian tribe or tribal organization. Up to 5 years.

DESCRIPTION: The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS), is accepting applications for fiscal year (FY) 2017 Cooperative Agreements to Implement Zero Suicide in Health Systems (Short Title: Zero Suicide). The Zero Suicide model is a comprehensive, multi-setting approach to suicide prevention in health systems. The purpose of this program is to implement suicide prevention and intervention programs, for individuals who are 25 years of age or older, that are designed to raise awareness of suicide, establish referral processes, and improve care and outcomes for such individuals who are at risk for suicide. Grantees will implement the Zero Suicide model throughout their health system. Health systems that do not provide direct care services may partner with agencies that can implement the Zero Suicide model. For communities without well-developed behavioral health care services, the Zero Suicide model may be implemented in Federally Qualified Health Centers or other primary care settings.

WEBSITE/LINK: <https://www.samhsa.gov/grants/grant-announcements/sm-17-006>

First Responders - Comprehensive Addiction and Recovery Act Cooperative Agreement

DEADLINE: Monday, July 31, 2017

AMOUNT: Up to \$250,000 – \$800 000 per year. Up to 4 years.

DESCRIPTION: The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP), is accepting applications for fiscal year (FY) 2017 First Responders-Comprehensive Addiction and Recovery Act (FR-CARA) Cooperative Agreements. SAMHSA will award FR-CARA funds to states, tribes and tribal organizations, and local governmental entities. Local governmental entities include, but are not limited to, municipal corporations, counties, cities, boroughs, incorporated towns, and townships. The purpose of this program is to allow first responders and members of other key community sectors to administer a drug or device approved or cleared under the Federal Food, Drug, and Cosmetic Act for emergency treatment of known or suspected opioid overdose. Grantees will train and provide resources to first responders and members of other key community sectors at the state, tribal, and local governmental levels on carrying and administering a drug or device approved or cleared under the Federal Food, Drug, and Cosmetic Act for emergency treatment of known or suspected opioid overdose. Grantees will also establish processes, protocols, and mechanisms for referral to appropriate treatment and recovery communities.

WEBSITE/LINK: <https://www.samhsa.gov/grants/grant-announcements/sp-17-005>

Improving Access to Overdose Treatment

DEADLINE: Monday, July 31, 2017

AMOUNT: Up to \$1,000,000 per year. Up to 5 years. 1 award.



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Eligibility: SAMHSA is limiting eligibility to Federally Qualified Health Centers (FQHCs) (as defined in section 1861(aa) of the Social Security Act), opioid treatment programs as defined under part 8 of title 42, Code of Federal Regulations, and practitioners dispensing narcotic drugs pursuant to section 303(g) of the Controlled Substances Act.

The eligibility for this grant program is statutorily defined in Section 544 of the Public Health Service Act.

DESCRIPTION: The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP), is accepting applications for fiscal year (FY) 2017 Improving Access to Overdose Treatment (Short Title: OD Treatment Access). SAMHSA will award OD Treatment Access funds to a Federally Qualified Health Center (FQHC), Opioid Treatment Program, or practitioner who has a waiver to prescribe buprenorphine to expand access to Food and Drug Administration (FDA)-approved drugs or devices for emergency treatment of known or suspected opioid overdose. The grantee will partner with other prescribers at the community level to develop best practices for prescribing and co-prescribing FDA-approved overdose reversal drugs. After developing best practices, the grantee will train other prescribers in key community sectors as well as individuals who support persons at high risk for overdose.

In 2013, SAMHSA released the Opioid Overdose Prevention Toolkit to help reduce the number of opioid-related overdose deaths and adverse events. The OD Treatment Access grant program will utilize this toolkit and other resources to help the grantee train and provide resources for health care providers and pharmacists on the prescribing of drugs or devices approved or cleared under the Federal Food, Drug, and Cosmetic Act for emergency treatment of known or suspected opioid overdose

The OD Treatment Access grant program will also ensure the grantee establishes protocols to connect patients who have experienced a drug overdose with appropriate treatment, including medication-assisted treatment and appropriate counseling and behavioral therapies.

WEBSITE/LINK: <https://www.samhsa.gov/grants/grant-announcements/sp-17-006>

(FORECASTED - NO ANNOUNCEMENT POSTED YET.)

Empowered Communities for a Healthier Nation - Department of Health and Human Services/Office of the Assistant Secretary for Health

DEADLINE: Jul 31, 2017

AMOUNT: \$350,000

DESCRIPTION: The Empowered Communities for a Healthier Nation Initiative seeks to demonstrate the effectiveness of collaborations with academic research centers, prevention research centers, teaching hospitals, and Native American Tribes and Tribal organizations to reduce significant health disparities impacting minorities and disadvantaged populations through the implementation of evidence-based strategies with the greatest potential for impact. The program will serve residents in counties disproportionately impacted by the opioid epidemic; reduce the impact of serious mental



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illness and improve screening for serious mental illness at the primary care level for children, adolescents and/or adults; and reduce obesity prevalence and disparities in weight status among disadvantaged children and adolescents. The cooperative agreement will support the HHS Secretary's priority areas that include the following core program components: Opioid abuse: These cooperative agreements are targeted to rural and urban communities that have experienced large increases in rates of opioid overdose deaths or opioid use disorder within the past five years. The cooperative agreements will:

- Support the development of community-level strategies aimed at preventing opioid abuse and increasing access to treatment and recovery services. These strategies should include the following partners: local public health, law enforcement, substance abuse providers, the medical community, community-based prevention and risk reduction organizations, and faith-based organizations.

- Support research to improve understanding of networks of people who inject drugs and risk factors for initiation of injection drug use and/or identifying effective strategies to reach, engage, and retain people who inject drugs in substance abuse treatment, including medication-assisted treatment for opioid use disorder.
- Support implementation research to identify innovative strategies to provide comprehensive services to people who inject drugs, including a focus on reducing the transmission of viral hepatitis and HIV, engaging in opioid use disorder treatment, and providing overdose prevention education and naloxone distribution. Address mental illness through collaborative care networks:
- Improve the routine screening and diagnosis of mental disorders.
- Increase providers' use of evidence-based protocols for the proactive management of diagnosed mental disorders.
- Improve clinical and community support for active patient engagement in treatment goals setting and self-management. Address childhood/adolescent obesity:
- Support prevention research studies to identify the combinations of intervention components that are most effective and determine which components are critical to success.
- Improve access to behavioral interventions to reduce recreational sedentary time and improve nutritional, physical activity and weight-related outcomes among children and adolescents.
- Develop family-centered strategies that reduce obesity and co-occurring conditions such as diabetes, hypertension, and hyperlipidemia. Each application may address only one of the three priority areas: opioid abuse; mental illness; or childhood/adolescent obesity.

WEBSITE/LINK: <https://www.grants.gov/web/grants/view-opportunity.html?oppId=294060>



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Targeted Capacity Expansion: Medication Assisted Treatment - Prescription Drug and Opioid Addiction (Short Title: MAT-PDOA) - Department of Health and Human Services/Substance Abuse and Mental Health Services Adminis

DEADLINE: Jul 31, 2017

AMOUNT: \$2,000,000 X 5 AWARDS.

DESCRIPTION:

Eligibility (CONTACT YOUR STATE):

As the 2017 Omnibus requires, **eligibility is limited to the states** with the highest rates of admissions, including those that have demonstrated a dramatic increase in admissions for the treatment of opioid use disorder. **See Appendix E for a list of eligible states.** The application must be submitted by the Single State Agency (SSA) for Substance Abuse within the state. FY 2015 MAT-PDOA grantees funded under announcement TI-15-007 and FY 2016 MAT-PDOA grantees funded under announcement TI-16-014 are not eligible to apply for this program.

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT), is accepting applications for fiscal year (FY) 2017 Targeted Capacity Expansion: Medication Assisted Treatment - Prescription Drug and Opioid Addiction (MAT-PDOA) grants. The purpose of this program is to expand/enhance access to medication-assisted treatment (MAT) services for persons with an opioid use disorder seeking or receiving MAT. This program targets states identified with having the highest rates of primary treatment admissions for heroin and opioids per capita and includes those with the most dramatic increases for heroin and opioids, as identified by SAMHSA's Treatment Episode Data Set (TEDS): 2007 – 2014. The desired outcomes include: 1) an increase in the number of admissions for MAT; 2) an increase in the number of clients receiving integrated care/treatment; 3) a decrease in illicit opioid drug use at six-month follow-up; and 4) a decrease in the use of prescription opioids in a non-prescribed manner at six-month follow-up. For the purpose of this FOA, integrated care/treatment is defined as the organized delivery and/or coordination of medical (including the use of Food and Drug Administration (FDA)-approved drugs [buprenorphine, methadone, extended release injectable naltrexone] for addiction), behavioral, social, peer, and other recovery support services provided to individual patients who have multiple healthcare needs in order to produce better overall health outcomes. MAT is defined as the use of FDA-approved opioid agonist medications (e.g., methadone, buprenorphine products, including buprenorphine/naloxone combination formulations and buprenorphine mono-product formulations) for the maintenance treatment of opioid use disorder and opioid antagonist medication (e.g., extended-release) in combination with behavioral therapies to prevent relapse to opioid use. MAT includes screening, assessment (which includes determination of severity of opioid use disorder, including presence of physical dependence and appropriateness for MAT), and case management. MAT is to be provided in combination with comprehensive opioid use disorder treatment, including but not limited to: counseling, behavioral therapies, other clinically appropriate services in order for individuals to achieve and maintain abstinence from all opioids and heroin, and, when needed, pharmacotherapy for co-occurring alcohol use disorder. MAT is to be provided in a clinically driven, person-centered, and individualized setting.



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WEBSITE/Link: <https://www.samhsa.gov/grants/grant-announcements/ti-17-017>

Robbie Foundation Accepting Applications for Adaptive Equipment/Assistive Technology/Therapy Treatment Program (AAT Program)

DEADLINE: July 5 2017 and October 5 2017.

AMOUNT: Funding will be given for items and services that help maximize growth and development, as well as create an easier and more enjoyable learning and/or living environment for the child.

DESCRIPTION: The Robbie Foundation was founded on behalf of a boy living with cerebral palsy, a condition that leaves him dependent on others for all his daily needs. The goal of foundation is to see the world brought to children who are unable to explore it on their own.

To that end, the foundation is accepting applications for its ATT Program, which is open to children with special needs who would benefit from adaptive equipment, assistive technology, therapy treatment, and/or any other essential item not covered by insurance or any additional funding resource. Grants will be awarded for items and services that help maximize the growth and development of and that create an easier and more enjoyable learning and/or living environment for the child.

Any individual may submit an application on behalf of a recipient. However, consent must be given by the individual or his/her parent(s) or guardian(s).

WEBSITE/LINK: <http://robbiefoundation.com/rf/programs/>

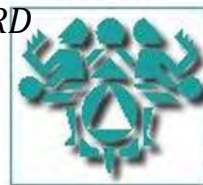
Addressing Suicide Research Gaps: Understanding Mortality Outcomes (R01)- Department of Health and Human Services/National Institutes of Health

DEADLINE: Nov 02, 2017

AMOUNT: \$300,000

DESCRIPTION: This funding opportunity announcement (FOA) seeks to support efforts focused on linking pertinent data from healthcare system records (e.g., suicide attempt events) to mortality data so that a more accurate understanding of the risk factors for, and the burden of, suicide among those seen in structured healthcare settings can be discerned. Specifically, data are needed on the type, severity, and timing of suicide predictors in the U.S. In addition to improving our national knowledge of the burden of suicide, these data offer the hope of yielding essential benchmarks for both public and private care providers/insurers, who increasingly will be seeking improvements to reduce the frequency of suicide events in their systems. Projects supported by this FOA will help address gaps identified in the 2014 Prioritized Research Agenda for Suicide Prevention.

WEBSITE/LINK: <https://grants.nih.gov/grants/guide/rfa-files/RFA-MH-18-410.html>



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(Internship Program/Scholarship Opportunities)

CDC Undergraduate Public Health Scholars Program (CUPS): A Public Health Experience to Expose Undergraduate and Graduate Students to Minority Health, Public Health and Health Professions/Department of Health and Human Services/Centers for Disease Control - OD

DEADLINE: Jun 19, 2017 Electronically submitted applications must be submitted no later than 5:00 p.m., ET, on the listed application due date.

AMOUNT: \$850,000

DESCRIPTION: CDC seeks to fund organizations with the ability to reach undergraduate and graduate students, including sexual and gender, people with disabilities, low socioeconomic status (SES) and those from underrepresented racial and ethnic minority populations. The ultimate goal is to increase the diversity of the public health workforce, improve the representation of underrepresented populations in public health, and increase the quality of public health services nationally.

WEBSITE/LINK: <http://www.cdc.gov/features/studentopportunities/index.html>

DIRECTORS OF HEALTH PROMOTION AND EDUCATION (DHPE)-2017 SPRING HEALTH EQUITY INTERNSHIP

DEADLINE: & AMOUNT: For more information, contact Karen Probert at internship@asphn.org.

DESCRIPTION: DHPE has received supplemental funding to support the Health Equity Internship for an additional year. The funding is from the Centers of Disease Control and Prevention (CDC) Division for Heart Disease and Stroke Prevention (DHDSP). The mission of the CDC DHDSP is to provide public health leadership to improve cardiovascular health for all, reduce the burden, and eliminate disparities associated with heart disease and stroke. DHPE is working with the Association of State Public Health Nutritionists (ASPHN) to administer the Internship Program for the 2017 Spring cohort.

College students selected for these cohorts should be interested in an internship project and placement site that focuses on the following:

Cardiovascular Disease Risks Reduction;

Heart Disease Prevention and Education, including Hypertension and Stroke;

Nutrition and Healthy Eating;

Physical Activity and/or Obesity. Interested students should mention their proposed internship site within their application.

Preference will be given to undergraduate and graduate students who attend Minority-Serving Institutions (HBCUs, HSIs and Tribal Colleges), are from racial and ethnic populations, and/or have demonstrated interest in working to achieve health equity in minority and underserved communities.



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WEBSITE/LINK: For more information, contact Karen Probert at internship@asphn.org.

Native Student Travel Scholarships: Connecting STEM and Justice

DEADLINE: Apply now for sponsorship to visit Philadelphia and attend the International Association of Chiefs of Police Conference (IACP) on October 21-24, 2017.

AMOUNT: Funding includes registration, airfare, lodging, ground transportation, baggage, meals, and incidental expenses. You would fly from your home airport to Philadelphia on October 20, 2017, and return on October 25, 2017. Decision notices will be sent to all applicants by August 30, 2017.

DESCRIPTION: Are you an American Indian or Alaska Native student in science, tech, engineering, or math (STEM)?

The National Institute of Justice is looking for five qualified undergrad or grad students to attend this conference, which brings together thousands of professionals from federal, state, local, and tribal organizations.

Attendance will aid you in exploring applications of your STEM training to issues of criminal justice and public safety. You will have the opportunity to interact with scientists and attend panel discussions on the most urgent issues facing communities and innovative, evidence-based solutions.

WEBSITE/LINK: https://nij.gov/topics/tribal-justice/Pages/native-student-travel-scholarships.aspx?utm_source=eblast-govdelivery&utm_medium=email&utm_campaign=adhoc

(CIVIL / HUMAN RIGHTS)

Pride Foundation Seeks Applications for 2017 Community Grants Program

DEADLINE: Grant applications will be accepted until June 30, 2017 at 4pm AKST/5pm PST/6pm MST.

AMOUNT: While there is no maximum grant award, the average grant amount will range between \$1,000 and \$10,000.

DESCRIPTION: Pride Foundation seeks to invest in organizations, projects, programs and/or strategies that advance our priorities by expanding opportunities and/or advancing full equality through one or more of the following:

Reduce growing disparities and inequities within the LGBTQ community, with an emphasis on supporting people who remain most invisible and vulnerable

Promote structural and institutional change that eliminates long-standing barriers to opportunities and resources for LGBTQ people

Address emerging and critical issues that threaten the safety, livelihood, and well-being of LGBTQ individuals and families across our region



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Expand and deepen the level of engagement with LGBTQ people and allies, with a particular emphasis on those who have been historically marginalized, including people of color, transgender people and low-income people

Cultivate an interconnected LGBTQ movement across our region by fostering collaboration and bringing together diverse organizations and leaders to advance the agenda for equality.

Requirements - Organizations or projects must operate within one or more of the Northwest states of Alaska, Idaho, Montana, Oregon, and/or Washington.

Applicant projects or organizations must have 501(c)3 non-profit tax status or be affiliated with an organization that has 501(c)3 tax status that will assume fiscal responsibility for all funds received and expended.

Organizations can apply for only one grant per cycle. Only one Community Grant application per organization per cycle.

Organizations that receive grants must submit a written evaluation at the completion of the project.

Pride Foundation does not provide multi-year funding commitments. Applicants are welcome to apply annually.

What we do fund:

*General operating (for LGBTQ centered organizations only)

Capacity building (any organization)

New and/or current projects, programs, and/or strategies (any organization)

Joint projects (any organization) – We define joint projects as two or more organizations working together to achieve shared goals, in which each brings different and complementary perspectives, knowledge, and/or skills to that project/program, have accountability and responsibility to each other and that each entity of the collaboration will receive a portion of the funding if awarded. If you apply for a joint project grant with other organization(s), you cannot apply for an community grant as an individual organization. Only one Community Grant application per organization per cycle

WEBSITE/Link: <http://www.pridefoundation.org/what-we-do/grants/guidelines/>

(CHILDREN / YOUTH ~ OREGON ONLY)

PGE Foundation Accepting Applications From Oregon Organizations for Safe and Stable Families Program

DEADLINE: Applications will be accepted between June 1, 2017, and July 10, 2017.

AMOUNT: SEE ONLINE APPLICATION.



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DESCRIPTION: Portland General Electric established the PGE Foundation in 1997 to improve quality of life for Oregonians. Since its inception, the foundation has awarded grants totaling nearly \$20 million across the state.

Currently, the foundation is accepting applications for its Safe and Stable Families, which supports organizations that use preventive approaches designed to help Oregon families create stable environments in which children can grow and thrive, with a focus on food insecurity, housing/homelessness, mental wellness, and parent engagement.

Grants are awarded for programs that help parents, grandparents, and guardians caring for children (up to age 26) develop stable family relationships, economic security, and a safe and consistent home environment. Priority will be given to projects that support underserved communities and deliver measurable outcomes. Grant amounts will be determined on a project-by-project basis.

To be eligible, applicants must be an Oregon-based organization classified as 501(c)(3) by the Internal Revenue Service. Priority will be given to those located in and serving counties where PGE has customers and power-generating plants, as well as those that operate collaboratively or in partnership with other nonprofits or agencies.

WEBSITE/LINK: http://www.pgefoundation.org/apply_for_funding.html

(COMMUNITY OPPORTUNITIES)

Rural Community Development Initiative Grants

DEADLINE: The deadline for receipt of an application is 4 p.m. local time, July 25, 2017. The application date and time are firm. The Agency will not consider any application received after the deadline. Applicants intending to mail applications must provide sufficient time to permit delivery on or before the closing deadline date and time. Acceptance by the United States Postal Service or private mailer does not constitute delivery. Facsimile (FAX), electronic mail, and postage due applications will not be accepted.

AMOUNT:

- Minimum grant award is \$50,000; maximum grant award is \$250,000
- Grant funds are limited and are awarded through a competitive process

Are matching funds required?

- Matching fund requirement equal to amount of grant
- In-kind contributions cannot be used as matching funds
- Partnerships with other federal, state, local, private and nonprofit entities are encouraged

DESCRIPTION: RCDI grants are awarded to help non-profit housing and community development organizations, low-income rural communities and federally recognized tribes support housing, community facilities and community and economic development projects in rural areas.

What is an eligible area?



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Rural and rural area--Any area other than (i) a city or town that has a population of greater than 50,000 inhabitants; and (ii) the urbanized area contiguous and adjacent to such city or town.

How may funds be used?

To improve housing, community facilities, and community and economic development projects in rural areas.

Rural Community Development Initiative grants may be used for, but are not limited to:

- Training sub-grantees to conduct:
- Home-ownership education
- Minority business entrepreneur education
- Providing technical assistance to sub-grantees on
- Strategic plan development
- Accessing alternative funding sources
- Board training
- Developing successful child care facilities
- Creating training tools, such as videos, workbooks, and reference guides
- Effective fundraising techniques

WEBSITE/LINK: <https://www.rd.usda.gov/programs-services/rural-community-development-initiative-grants>

Community Facilities Technical Assistance and Training Grant- Department of Agriculture/Utilities Programs

DEADLINE: Jul 24, 2017

AMOUNT: \$150,000 X 15 awards.

DESCRIPTION: The Agency will make grants to public bodies and private nonprofit corporations, (such as States, counties, cities, townships, and incorporated towns and villages, boroughs, authorities, districts, and Indian tribes on Federal and State reservations) to provide associations Technical Assistance and/or training with respect to essential community facilities programs. The Technical Assistance and/or training will assist communities, Indian Tribes, and Nonprofit Corporations to identify and plan for community facility needs that exist in their area. Once those needs have been identified, the Grantee can assist in identifying public and private resources to finance those identified community facility needs.

Congress authorized the Community Facilities Technical Assistance and Training Grant program in Title VI, Section 6006 of the Agricultural Act of 2014 (Pub. L. 113-79). Program regulations can be found at 7 CFR part 3570, subpart F, which are incorporated by reference in this Notice. The purpose of this Notice is to seek applications from entities that will provide technical assistance and/or training with respect to essential community facilities programs. It is the intent of this program to assist entities in rural areas in accessing funding under the Rural Housing Service's Community Facilities Programs in accordance with 7 CFR part 3570, subpart F. Funding priority will be made to private,



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nonprofit or public organizations that have experience in providing technical assistance and training to rural entities.

WEBSITE/Link: <https://www.gpo.gov/fdsys/pkg/FR-2017-05-23/pdf/2017-10487.pdf>

(ATHLETICS / SPORTS)

Bill Belichick Accepting Applications for Football, Lacrosse Programs

DEADLINE: Submit completed typed application and essay by July 1, 2017 online.

AMOUNT: To advance this mission, grants of up to \$10,000 will be awarded to deserving athletic communities or organizations in need of financial support.

DESCRIPTION: The Bill Belichick Foundation was established in 2013 by New England Patriots' coach Bill Belichick to provide coaching, mentorship, and financial assistance to individuals, communities, and organizations, with a focus on the sports of football and lacrosse. Through its grantmaking, the foundation endeavors to instill a love of sports, coaching, and team-building in the athletic leaders of tomorrow.

WEBSITE/Link: <http://billbelichickfoundation.org/bill-belichick-foundation-grant-application/>

2017 JUNE

Scaling the National Diabetes Prevention Program in Underserved Areas - Department of Health and Human Services, Centers for Disease Control - NCCDPHP

DEADLINE: Jun 12, 2017 Electronically submitted applications must be submitted no later than 11:59 p.m., ET, on the listed application due date.

AMOUNT: \$1,500,000

DESCRIPTION: Approximately 86 million Americans, or 1 in 3 adults, have prediabetes. Prediabetes is a health condition characterized by blood glucose levels that are higher than normal but not high enough to be diagnosed as diabetes. People with prediabetes have an increased risk of developing type 2 diabetes, heart disease, and stroke. Prediabetes is treatable, but only about 10 percent of people who have it are aware that they do. The CDC-led National Diabetes Prevention Program (National DPP) is a partnership of public and private organizations working collectively to build the program delivery infrastructure for an evidence-based lifestyle change program for adults with prediabetes to prevent or delay onset of type 2 diabetes. The lifestyle change program is founded on the science of the 2002 NIH Diabetes Prevention Program research study, and several translation studies that followed, which showed that making modest behavior changes helped participants with prediabetes lose 5% to 7% of their body weight and reduce their risk of developing type 2 diabetes by 58% and 71% for people over 60 years old. (<http://www.cdc.gov/diabetes/prevention/index.htm>) The CDC Diabetes Prevention Recognition Program (DPRP) is the quality assurance arm of the National DPP. The DPRP plays a critical role in assuring that organizations can effectively deliver the evidence-based lifestyle change program with quality and fidelity. To achieve CDC recognition,



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organizations must provide evidence they are following a CDC-approved curriculum and achieving meaningful results with patients based on established national standards (<http://www.cdc.gov/diabetes/prevention/recognition/about.htm>). There are over 1,200 CDC-recognized organizations across 50 states, the District of Columbia, Puerto Rico, and the Virgin Islands delivering the evidence-based lifestyle change program in-person, virtually, or through a combination of virtual/in-person modalities to accommodate different learning styles and preferences. These organizations are listed on the DPRP website at (https://nccd.cdc.gov/DDT_DPRP/Programs.aspx). The National DPP works toward equal access to the lifestyle change program for all populations at risk. Currently, there are gaps in the national infrastructure related to reaching and serving particular priority populations. Medicare beneficiaries, people with disabilities, men, and racial/ethnic minorities are under-represented relative to their estimated numbers and disease burden. Many live in areas of the country with few or no programs. Where programs do exist, they often lack the expertise necessary to help these populations overcome barriers to successful completion of the program. This is an open competition funding opportunity announcement (FOA) that builds on successful strategies tested in previous FOAs to scale and sustain the National Diabetes Prevention Program (National DPP) for general populations. In this FOA, those strategies will be adapted for both general populations, Medicare beneficiaries and one or more priority populations in underserved areas. Through a five-year cooperative agreement, CDC will support national or regional organizations with multi-state networks to deliver a CDC-recognized lifestyle change program in underserved areas to adult populations with prediabetes or at high risk for type 2 diabetes. Applicants must identify affiliate delivery sites in at least three states and enroll at least 1000 priority population participants in the first year. Continued growth in sites and participants is expected in years 2-5. Applicants must demonstrate the organizational capacity and experience working with affiliate sites and other key partners to implement and deliver a CDC-recognized lifestyle change program or other evidence-based behavior change program, including documenting program outcomes. Applicants must have demonstrated specialized experience working with general populations, Medicare beneficiaries and one or more priority populations in underserved areas to deliver a CDC evidence based lifestyle change program or other behavioral change program. Priority populations include men, African-Americans, Asian Americans, Hispanics, American Indians, Alaska Natives, Pacific Islanders, and non-institutionalized people with visual impairments or physical disabilities. These populations are prioritized because they have been enrolled in lifestyle change program at lower rates despite relatively higher rates of type 2 diabetes. To the extent the general population as well as priority populations have access and are enrolling, a reduction in incidence, or new cases, of type 2 diabetes is anticipated. Previous enrollment of priority population participants does not by itself constitute specialized experience. If applicants do not substantially meet this criteria, they may enter into a formal collaboration with one or more organizations that have this experience. These collaborations must be formalized through a memorandum of understanding (MOU) or memorandum of agreement (MOA) that details the respective roles of the applicant and each of the collaborating partners in implementing the required strategies and activities and in meeting the outcomes and performance measures outlined in this FOA. Awardees must implement activities in all 5 strategies: 1) Increase the availability of CDC-recognized organizations in underserved areas; 2) Increase clinician screening, detection, and referral of adults with prediabetes or at high risk for type 2 diabetes to CDC-recognized organizations; 3) Increase awareness of prediabetes and enrollment in the lifestyle change program; 4) Increase retention rates for participants in the lifestyle change program; 5) Increase benefit coverage for participation in the lifestyle



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change program. By the end of the cooperative agreement, delivery infrastructure will be expanded, closing the enrollment gap so that more priority population participants with prediabetes successfully complete the CDC lifestyle change program, achieve 5-7% weight loss, and significantly reduce their risk for developing type 2 diabetes. The announcement is only for non-research activities supported by CDC; applications for research cannot be considered through this announcement.

WEBSITE/LINK: <https://www.grants.gov/web/grants/view-opportunity.html?oppId=290159>

Public Policy Effects on Alcohol-, Marijuana-, and Other Substance-Related Behaviors and Outcomes (R03) Department of Health and Human Services National Institutes of Health

DEADLINE: June 16

AMOUNT: See application.

DESCRIPTION: This Funding Opportunity Announcement (FOA) encourages applications to conduct research on the effects of public policies on health-related behaviors and outcomes associated with alcohol, marijuana, and other substances. The purpose of the FOA is to advance understanding of how public policy may serve as a tool for improving public health and welfare through its effects on behaviors and outcomes pertaining to alcohol and other drugs. This FOA is intended to support innovative research to examine policy effects that have the potential to lead to meaningful changes in public health. Research projects that may be supported by this FOA include, but are not necessarily limited to: causal analyses of the effects of one or multiple public policies; evaluations of the effectiveness of specific public policies as tools for improving public health through their effects on alcohol-, marijuana-, and other substance-related behaviors and outcomes; and research to advance methods and measurement used in studying relationships between public policies and alcohol-, marijuana-, and other substance-related behaviors and outcomes. The R03 Small Research Grant Program supports discrete, well-defined projects that realistically can be completed in two years and that require limited levels of funding. This program supports different types of projects including (but not limited to) pilot or feasibility studies; secondary analysis of existing data; small, self-contained research projects; and development of research methodology.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=291415>

Agriculture and Food Research Initiative - Childhood Obesity Prevention Challenge Area

DEADLINE: Wednesday, June 28, 2017

AMOUNT: \$2,500,000

DESCRIPTION: This AFRI Challenge Area focuses on the societal challenge to end obesity among children, the number one nutrition-related problem in U.S. Food is an integral part of the process that leads to obesity, and USDA has a unique responsibility for the food system in the United States. The long-term goal of this Challenge Area is to reduce the



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prevalence of obesity among children and adolescents ages 2–19 years or any subset of this age range. Applications to this Challenge Area will support multi-function Integrated Research, Education, and Extension Projects and Food and Agricultural Science Enhancement (FASE) Grants. See Childhood Obesity Prevention Challenge Area RFA for details.

WEBSITE/LINK: [https://nifa.usda.gov/sites/default/files/rfa/FY%202017%20AFRI%20Childhood%20Obesity%20Prevention Final.pdf](https://nifa.usda.gov/sites/default/files/rfa/FY%202017%20AFRI%20Childhood%20Obesity%20Prevention%20Final.pdf)

SMART-2017-4840 - SMART FY 17 Support for Adam Walsh Act Implementation Grant Program Department of Justice

DEADLINE: Jun 29, 2017

AMOUNT: \$400,000

DESCRIPTION: The Office of Sex Offender Sentencing, Monitoring, Apprehending, Registering, and Tracking (SMART) Support for Adam Walsh Act Implementation Grant Program assists jurisdictions with developing and/or enhancing programs designed to implement the Sex Offender Registration and Notification Act (SORNA). SORNA (42 U.S.C. § 16901, Title I) was enacted to protect the public by establishing a comprehensive national system of standards for the registration and notification of convicted sex offenders. The term jurisdiction is defined in the SORNA national guidelines as any State of the United States, the District of Columbia, the principal U.S. territories and federally-recognized Indian tribes to the extent provided by SORNA section 127. Statutory Authority: This solicitation will be funded by funds made available pursuant to the Adam Walsh Child Protection Act, 42 U.S.C. 16901 et seq.; Pub. L. No. 114-113, 129 Stat. 2242, 2307. Program-Specific Information The Support for Adam Walsh Act (AWA) Implementation Grant Program assists jurisdictions with developing and/or enhancing programs designed to implement requirements of SORNA. In summary, SORNA requires: (1) all States, the District of Columbia, the principal U.S. territories, and participating federally recognized Indian tribes to maintain a sex offender registry; and (2) sex offenders to register and maintain a current registration in each jurisdiction where the offender resides, is an employee, or is a student. SORNA also sets forth requirements for sex offender registries, to include specified information, duration of registration, and in-person verification of sex offender registration information, as well as participation in the National Sex Offender Public Website (NSOPW), and the utilization of the SORNA Exchange Portal. For more specific information about substantial implementation of SORNA and access to the National Guidelines and Supplemental Guidelines on Sex Offender Registration and Notification, please visit http://www.smart.gov/pdfs/final_sornaguidelines.pdf. For information and resources on SORNA, visit www.smart.gov. Goals, Objectives, and Deliverables The SMART Office is interested in proposals that facilitate, enhance and maintain jurisdictional implementation of SORNA. For State and Territorial jurisdictions that have not yet substantially implemented SORNA, applicants must have received a SORNA Substantial Implementation Report from the SMART Office, or submitted materials for review, and must explain how the proposed project will bring the jurisdiction closer to implementation based upon SMART's review. For tribal jurisdictions that have not yet substantially implemented SORNA, applicants must have received a SORNA Substantial Implementation Report, or submitted materials for review or requested and received a "reasonable time" extension from the SMART Office. If the jurisdiction has received a Substantial Implementation



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Report, the applicant must explain how the proposed project will bring the jurisdiction closer to implementation based on SMART's review. Discussion of a jurisdiction's planned activities should include information regarding the jurisdiction's SORNA implementation working group. The working group plan should include a list of the working group members, their responsibility regarding SORNA implementation, and an agenda for the group's work during the grant period, in addition to the timeline of the applicant's planned activities otherwise required by this solicitation. It is expected that successful grantees will complete semi-annual progress reports that include updates on their jurisdiction's working group meetings. This requirement does not apply to jurisdictions that have already been found to have substantially implemented SORNA. For those jurisdictions that have substantially implemented SORNA, the application must explain how the proposed project will either support continued implementation of SORNA or enhance their registration/notification programs. State and Territorial applicants should link their proposed activities with non-implemented factors as identified in their most recent SORNA Substantial Implementation Report. In developing and/or enhancing efforts or programs designed to implement or maintain SORNA standards, applicants may propose specific strategies and projects including, but not limited to, the following examples: Examples of strategies and projects to develop or enhance jurisdiction-wide SORNA implementation All applicants:

- Developing proposed legislation and administrative materials (such as policies and procedures) that address SORNA's requirements, including legal support.
- Providing support for coordinated interagency efforts to enhance implementation of SORNA requirements.
- Developing or enhancing law enforcement and other criminal justice agency information sharing within the jurisdiction as well as between jurisdictions.
- Implementing records management projects, such as converting paper documents to digital format as required by SORNA.
- Developing and implementing training, including safety training, for law enforcement and other criminal justice agency personnel responsible for sex offender registration, notification, monitoring, and/or management.
- Enhancing registration verification strategies, collaborating with other jurisdictions and agencies on absconder investigations, and expanding community education and prevention programs related to sex offender registration, notification, or management.
- Enhancing infrastructure to assist implementation of SORNA, such as the collection, storage, submission or analysis of sex offender biometric data (finger and palm prints) and DNA. See budget information on page 6 including referenced footnote for more information.

Tribal applicants:

- Tribes that have elected to carry out the requirements of SORNA are encouraged to apply for funding to support SORNA implementation activities that benefit a consortium of tribes that have elected to implement SORNA. Several tribes may choose to form a consortium to share resources (e.g., hardware, digital fingerprint equipment, kiosks; joint staff or shared registry office space; shared public registry website, etc.) or collaborate on enforcement activities or other facilities used for registration. An application to fund such a collaborative approach or project must include supporting documentation, such as an interagency agreement, a memorandum of understanding, or a letter of cooperation that demonstrates commitment from each member jurisdiction of the consortium.
- Tribes that have been found to have substantially implemented SORNA may apply for funding to create, improve and/or sustain registration/notification activities, including but not limited to developing community education programs on sex offender topics (e.g., promoting an understanding of the tribe's sex offender registration, notification, treatment, and community supervision strategies; safety planning; and facts and statistics about sexual offending and offenders), or collaboration with intra-tribal organizations, including victim service agencies, courts, probation, schools and other entities. An application to fund such a collaborative approach



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or project must include supporting documentation from the included tribal organizations detailing how the collaboration will be effectuated. The application should also detail how such strategies will sustain and support the tribe's sex offender registration and notification program. • Tribes that have been found to have substantially implemented SORNA may apply for funding to develop or enhance their inter-jurisdictional cooperation, including but not limited to information-sharing infrastructure improvement. States with tribal jurisdictions within their borders: • States may apply to support efforts of local or state units of government, or P.L. 280 tribes, to develop or enhance their sex offender registration and notification functions as they pertain to tribal nations that have been delegated to the state for the purpose of substantial implementation of SORNA. • State jurisdictions that include P.L. 280 tribes are encouraged to design projects that address SORNA implementation as it relates to these tribes. • State jurisdictions that have Tribal SORNA Jurisdictions within their borders may apply for funding to enhance their collaboration with SORNA tribes including but not limited to enhancing information sharing such as tribal access to NCIC/NSOR. An application to fund such a collaborative approach or project must include supporting documentation, such as an interagency agreement, a memorandum of understanding, or a letter of cooperation, which demonstrates the collaborative endeavor from each member SORNA jurisdiction involved in the collaboration. Additional Information Required State and territory applicants that are eligible to receive Byrne/JAG reallocation funding should describe how the proposed project complements the work that the jurisdiction plans to perform with that reallocation funding. Applicants shall ensure that the project involves activities that are separate from or complement the tasks being performed with the SORNA reallocation funding, so as to avoid receiving duplicate funds for the same activity. The Goals, Objectives and Deliverables are directly related to the performance measures set out in the table in Section D. Application and Submission Information, under "Program Narrative."

WEBSITE/LINK: <https://www.smart.gov/pdfs/SMARTFY17AWA.pdf>

2017 JULY

Hospice and Palliative Nurses Foundation

DEADLINE: July 1, 2017

AMOUNT: A single grant of up to \$15,000 will be awarded.

DESCRIPTION: The Hospice and Palliative Nurses Foundation, the charitable arm of the Hospice and Palliative Nurses Association, is accepting applications for its Certification Research Grant program.

The HPNF Certification Research Grant is intended to provide investigators with resources to conduct exploratory, pilot, or feasibility studies that will lead to larger scale projects linking certification with patient outcomes. Examples include collecting preliminary data about the distribution of certification qualifications among staff of different types of organizations or examining datasets from healthcare systems for patterns of staffing and outcomes. To be eligible, the principal investigator must be actively involved in some aspect of hospice and palliative care practice, education, or research; hold a master's or doctoral degree or be enrolled in a doctoral program; and have a project that is consistent with the purpose of the research grant. Preference will be given to HPNA members.



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For complete program guidelines and application instructions, see the HPNF website.

WEBSITE/LINK: <http://hpnf.advancingexpertcare.org/research/research-grant-opportunities/>

National Lupus Outreach and Clinical Trial Education Program (Lupus Program)

DEADLINE: July 1, 2017

AMOUNT: \$250,000-\$325,000 for Priority A; \$450,000-\$550,000 for Priority B

DESCRIPTION: The Office of Minority Health (OMH) at the United States Department of Health and Human Services announces the availability of Fiscal Year 2017 grant funds for the National Lupus Outreach and Clinical Trial Education Program (Lupus Program). The Lupus Program seeks to reduce lupus related health disparities among racial and ethnic minority populations disproportionately affected by this disease by: (1) implementing a national health education program on lupus (Priority A); and (2) developing, piloting and assessing clinical trial education interventions for health care providers and paraprofessionals focusing on improving recruitment and retention rates in clinical trials for racial and ethnic minority populations affected by lupus (Priority B).

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=289374>

Karma for Cara Foundation Invites Applications for Youth Microgrants

DEADLINE: JULY 1, 2017

AMOUNT: \$250 and \$1,000

DESCRIPTION: As part of our efforts to support youth volunteerism, we started a microgrant program in fall 2014. We are encouraging kids 18 and under to apply for funds between \$250 and \$1,000 to complete service projects in their communities. Whether it is turning a vacant lot into a community garden, rebuilding a school playground or helping senior citizens get their homes ready for winter, we want to hear what project you're passionate about.

WEBSITE/LINK: <http://karmaforcara.org/get-involved/apply-for-a-microgrant/>

Distance Learning & Telemedicine Grant - Department of Agriculture Utilities Programs

DEADLINE: Jul 17, 2017

AMOUNT: \$500,000

DESCRIPTION: DLT grants are designed to provide access to education, training, and health care resources for rural Americans. The DLT Program is authorized by 7 U.S.C. 950aaa and provides financial assistance to encourage and improve telemedicine and distance learning services in rural areas through the use of telecommunications, computer networks, and related advanced technologies that students, teachers, medical professionals, and rural residents can use. The regulation for the DLT Program can be



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found at 7 CFR part 1703 (Subparts D through E). The grants, which are awarded through a competitive process, may be used to fund telecommunications-enabled information, audio and video equipment, and related advanced technologies which extend educational and medical applications into rural areas. Grants are intended to benefit end users in rural areas, who are often not in the same location as the source of the educational or health care service. Of the funds made available, \$1,600,000.00 will be prioritized to provide for communication upgrades between ambulances, emergency transportation vehicles and medical facilities.

WEBSITE/LINK: <https://www.rd.usda.gov/programs-services/distance-learning-telemedicine-grants>

Global Infectious Disease Research Training Program (D43)

DEADLINE: Letter of Intent Due Date(s) -30 days prior to the application due date. July, 27, 2017

AMOUNT: Applications budgets are limited to \$230,000 per year for new awards and \$276,000 per year for renewal awards (total direct costs). The maximum project period is up to 5 years.

DESCRIPTION: This Funding Opportunity Announcement (FOA) encourages applications for the Global Infectious Disease Research Training program from U.S. and LMIC research institutions. The application should propose a collaborative research training program that will strengthen the capacity of a LMIC institution to conduct infectious disease research that focuses on 1) major endemic or life-threatening emerging infectious diseases 2) neglected tropical diseases 3) infections that frequently occur as co-infections in HIV infected individuals or 4) infections associated with non-communicable disease conditions of public health importance in LMICs. FIC will support innovative research training programs that are designed to build sustainable infectious disease research capacity at an institution in an endemic LMIC. Sustainable infectious disease research capacity is known to require a critical mass of scientists and health research professionals with in-depth scientific expertise and complementary leadership skills that enable the institution to conduct independent, internationally-recognized infectious disease research relevant to the health priorities of their country.

WEBSITE/LINK: <http://grants.nih.gov/grants/guide/pa-files/PA-17-057.html>

AUGUST 2017

**Centers for AIDS Research (P30) - Department of Health and Human Services
National Institutes of Health**

DEADLINE: August 1, 2017

AMOUNT: \$3,000,000

DESCRIPTION: The purpose of this Funding Opportunity Announcement (FOA) is to invite applications for the Centers for AIDS Research (CFAR) program to provide administrative and shared research support to enhance HIV/AIDS research. CFARs provide core facilities,



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expertise, resources, and services not readily obtained otherwise through more traditional funding mechanisms. The program emphasizes interdisciplinary collaboration across all areas of HIV/AIDS research.

WEBSITE/LINK: <https://grants.nih.gov/grants/guide/pa-files/PAR-17-237.html>

Russell Sage Foundation Seeks Letters of Inquiry for Social Inequality Research

DEADLINE: AUGUST 21, 2017 (LETTERS OF INQUIRY)

AMOUNT: Two-year grants of up to \$150,000 will be awarded to qualified organizations.

DESCRIPTION: One of the oldest foundations in America, the Russell Sage Foundation was established by Mrs. Margaret Olivia Sage in 1907 for "the improvement of social and living conditions in the United States." In pursuit of its mission, the foundation now dedicates itself to strengthening the methods, data, knowledge, and theoretical core of the social sciences as a means of diagnosing social problems and improving social policies.

The foundation's program on Social Inequality supports research on the social, economic, political, and labor market consequences of rising economic inequality in the United States. The program seeks Letters of Inquiry for investigator-initiated research projects that broaden current understanding of the causes and consequences of rising economic inequality. Priority will be given to projects that use innovative data or methodologies to address important questions about inequality.

Examples of the kinds of topics that are of interest include but are not limited to economic well-being, equality of opportunity, and intergenerational mobility; the political process and resulting policies; psychological and/or cultural change; education; labor markets; child development and child outcomes; neighborhoods and communities; families, family structure, and family formation; and other forms of inequality.

WEBSITE/LINK: <http://www.russellsage.org/research/funding/social-inequality>

Foundation for Physical Therapy Accepting Applications for Research Grants

DEADLINE: AUGUST 3, 2017

AMOUNT: To that end, grants of up to \$40,000 will be awarded to research projects designed to evaluate the effectiveness of physical therapist interventions within any discipline relevant to the field. Funds may be requested to meet any type of expense reasonably associated with the research project, including salaries and fringe benefits, purchase or rental of equipment, supplies, travel, publication costs, printing or postage, and special services such as computer time, photographic services, and secretarial or research assistant support.

DESCRIPTION: The mission of the Foundation for Physical Therapy is to fund and publicize physical therapy research that determines the scientific basis and value of services intended to optimize physical functioning by physical therapists, and to develop the next generation of researchers.



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FPT supports only those intervention studies in which the interventions are provided by physical therapists, or selected components of the interventions are provided by physical therapist assistants under the direction and supervision of physical therapists.

To be eligible, applicants must be an individual or a group of investigators applying through a U.S. sponsoring organization/institution with which they are affiliated. Groups must designate one member as the principal investigator responsible for directing the project. Other members of the group may be physical therapists, physical therapist assistants, or individuals from other disciplines that are relevant to the proposed study.

WEBSITE: <http://www.foundation4pt.org/wp-content/uploads/2014/10/FRG-Guidelines-4.11.17-Final.pdf>

Behavioral Interventions for Prevention of Opioid Use Disorder or Adjunct to Medication Assisted Treatment-SAMHSA Opioid STR Grants (R21/R33) -Department of Health and Human Services/National Institutes of Health

DEADLINE: Aug 04, 2017

AMOUNT: \$200,000

DESCRIPTION: The purpose of this FOA is to solicit applications to examine the impact of behavioral interventions within the context of states plans for use of the SAMHSA Opioid STR grant funds authorized under the 21st Century Cures Act. Applications are encouraged for studies that examine the impact of interventions such as mindfulness meditation, cognitive behavioral therapy, or multi-disciplinary rehabilitation for primary or secondary prevention for opioid use disorder (OUD) or as an adjunct to medication assisted treatment (MAT) of OUD. Applications that emphasize treatment of the comorbidity of OUD and chronic pain are of particular interest.

WEBSITE/LINK: <https://grants.nih.gov/grants/guide/rfa-files/RFA-AT-18-001.html>

SEPTEMBER 2017

Leveraging Population-based Cancer Registry Data to Study Health Disparities (R21) - Department of Health and Human Services/National Institutes of Health

DEADLINE: Sep 07, 2017

AMOUNT: \$200,000

DESCRIPTION: The goal of this Funding Opportunity Announcement (FOA) is to efficiently use the existing cancer registry infrastructure by augmenting data already collected with additional information needed to understand health disparities among people diagnosed with cancer. Specifically, this FOA will support the study of factors influencing observed health disparities within the framework of population-based cancer registries by the inclusion of data not routinely collected by or linked to the registries. The studies should be hypothesis-driven and multidisciplinary approaches are encouraged. Investigators are encouraged to leverage the data already collected by the registries to investigate the determinates of health disparities. The goal of these analyses will be to understand why



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disparities in cancer treatment and outcomes persist by identifying factors contributing to disparities and their relative importance.

WEBSITE/LINK: <https://grants.nih.gov/grants/guide/pa-files/PA-17-288.html>

Disaster Assistance for State Units on Aging (SUAs) and Tribal Organizations in National Disasters Declared by the President – DHHS/Administration for Community Living

DEADLINE: Sep 15, 2017 Electronically submitted applications must be submitted no later than 11:59 p.m., ET, on the listed application due date.

AMOUNT: \$40,000

DESCRIPTION: Grants awarded under this announcement are to provide disaster reimbursement and assistance funds to those State Units on Aging (SUAs) and federally recognized Tribal Organizations who are currently receiving a grant under Title VI of the Older Americans Act (OAA), as amended. These funds only become available when the President declares a National Disaster and may only be used in those areas designated in the Disaster Declaration issued by the President of the United States. Eligible SUAs and Title VI grantees should discuss all disaster applications with ACL/AoA Regional staff before submitting a formal application. The amount of funds requested should be discussed with Regional staff before the application is completed. Providing a draft of the narrative justification for the application will help expedite the processing of an award. Applicants should talk with the State and local Emergency Managers to determine what funds may be available through other resources before applying for OAA funding. State Units on Aging (SUAs) and federally recognized Tribal Organizations currently receiving a grant under Title VI of the Older Americans Act must submit proposals electronically via <http://www.grants.gov>. At <http://www.grants.gov>, you will be able to download a copy of the application packet, complete it off-line, and then upload and submit the application via the Grants.gov website.

WEBSITE/LINK: <https://www.grants.gov/web/grants/view-opportunity.html?oppId=289875>

AAFP Accepting Applications for Free Clinics Grant Program

DEADLINE: The application deadline is September 15 at 5:00 CST. Application materials must be requested from the AAFP Foundation. See the AAFP Foundation website for complete program guidelines, a fact sheet, and application instructions.

AMOUNT: Up to \$25,000

DESCRIPTION: The American Academy of Family Physicians Foundation advances the values of family medicine by promoting humanitarian, educational, and scientific initiatives that improve the health of all people. To that end, the academy is accepting applications to its Family Medicine Cares USA program.

Launched in 2011, the program is designed to help new and existing free clinics care for the uninsured in areas of need across the United States by providing grants of up to \$25,000 for the purchase of items such as exam tables, EHR systems, and medical equipment.



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Family Medicine Cares USA also gives AAFP members, residents, and students the opportunity to volunteer their time and talents.

As of 2016, the program had awarded a total of \$340,829 to thirteen new clinics and seventeen existing clinics.

To be eligible, applicants must be a new clinic nearing completion of the Volunteers in Medicine (VIM) clinic development process and have an AAFP member in a leadership role within the clinic. Primary consideration will be given to clinics with an AAFP member serving as medical director and to those that have family medicine residents and/or medical students involved as volunteers.

WEBSITE/LINK: <http://www.aafpfoundation.org/foundation/our-work/grants-awards/all/fmc-usa.html>

2017 OCTOBER

Uncovering the Causes, Contexts, and Consequences of Elder Mistreatment (R01) - DHHS, NIH

DEADLINE: Oct 20, 2017

AMOUNT: \$300,000

DESCRIPTION: The purpose of this Funding Opportunity Announcement is to solicit applications proposing research that can lead to advancements in the understanding of elder mistreatment (emotional abuse, physical abuse, and sexual abuse; financial exploitation; abandonment; and neglect) and lay the foundation for the future design of mechanistically focused interventions for individuals at risk for mistreating elders, for promoting recovery and resilience in the maltreated and their families, and for preventing re-perpetration for those who have inflicted harm. Applications are solicited from multidisciplinary teams which include researchers from the fields of elder mistreatment, child abuse and neglect, intimate partner violence, and/or emergency medicine to pursue research in two priority areas: (1) the development of new and innovative tools and methods for the screening and detection of elder mistreatment; and (2) the identification of modifiable risk factors for elder mistreatment and modifiable protective factors, with potential to prevent maltreatment and/or enable individuals who have been mistreated and those who have mistreated others to overcome adversity and thrive. All applications should propose evidence-based strategies for addressing ethical challenges surrounding informed consent and study design in the research proposed, and to employ, when possible, best practices established in the fields of child abuse and neglect and/or intimate partner violence.

WEBSITE/LINK: <https://grants.nih.gov/grants/guide/rfa-files/RFA-AG-18-010.html>



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NO DEADLINE – GRANT RESOURCE INFORMATION

Evidence for Action: Investigator-Initiated Research to Build a Culture of Health

DEADLINE:

Informational Web Conferences:

Lessons Learned from a Year of Evidence for Action Grant Reviews

February 18, 2016 from 1:30-2:30 p.m. ET (10:30-11:30 a.m. PT)

Registration is required.

Archived Web Conferences

Informational Web Conferences were scheduled for June 3, 2015 and July 22, 2015
Recordings for both events are now available.

June 3, 2015 web conference recording available [here](#).

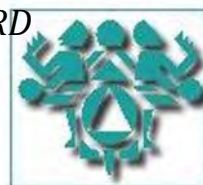
July 22, 2015 web conference recording available [here](#).

Timing: **Since applications are accepted on a rolling basis**, there is no deadline for submission. Generally, applicants can expect to be notified within 6-8 weeks of their LOI submission. Applicants invited to the full proposal stage will have 2 months to submit their proposal once they receive notification. Full proposal funding decisions will generally be made within 6-8 weeks of the submission deadline.

AMOUNT: Approximately \$2.2 million will be awarded annually. We expect to fund between five and 12 grants each year for periods of up to 30 months. We anticipate that this funding opportunity will remain open for at least a period of three years; however, decisions about modifications to the program and the duration of the program will be made by RWJF at its sole discretion.

DESCRIPTION: Evidence for Action: Investigator-Initiated Research to Build a Culture of Health is a national program of RWJF that supports the Foundation's commitment to building a Culture of Health in the United States. The program aims to provide individuals, organizations, communities, policymakers, and researchers with the empirical evidence needed to address the key determinants of health encompassed in the Culture of Health Action Framework. In addition, Evidence for Action will also support efforts to assess outcomes and set priorities for action. It will do this by encouraging and supporting creative, rigorous research on the impact of innovative programs, policies and partnerships on health and well-being, and on novel approaches to measuring health determinants and outcomes.

WEBSITE: http://www.rwjf.org/en/library/funding-opportunities/2015/evidence-for-action-investigator-initiated-research-to-build-a-culture-of-health.html?rid=3uOaFeLLcJROtLce2ecBeg&et_cid=469879



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Changes in Health Care Financing and Organization: Small Grants

DEADLINE: Grants are awarded on a rolling basis; proposals may be submitted at any time.

AMOUNT: This solicitation is for small grants of \$100,000 or less.

DESCRIPTION: Changes in Health Care Financing and Organization (HCFO) supports research, policy analysis and evaluation projects that provide policy leaders timely information on health care policy, financing and organization issues. Supported projects include:

examining significant issues and interventions related to health care financing and organization and their effects on health care costs, quality and access; and

exploring or testing major new ways to finance and organize health care that have the potential to improve access to more affordable and higher quality health services.

Eligibility and Selection Criteria

Researchers, as well as practitioners and public and private policy-makers working with researchers, are eligible to submit proposals through their organizations. Projects may be initiated from within many disciplines, including health services research, economics, sociology, political science, public policy, public health, public administration, law and business administration. RWJF encourages proposals from organizations on behalf of researchers who are just beginning their careers, who can serve either individually as principal investigators or as part of a project team comprising researchers or other collaborators with more experience. Only organizations and government entities are eligible to receive funding under this program.

Preference will be given to applicants that are either public entities or nonprofit organizations that are tax-exempt under Section 501(c) (3) of the Internal Revenue Code and are not private foundations as defined under Section 509(a).

Complete selection criteria can be found in the Call for Proposals.

WEBSITE: <http://www.rwjf.org/en/grants/funding-opportunities/2011/changes-in-health-care-financing-and-organization--small-grants.html>

The National Children's Alliance

Deadline: <http://www.nationalchildrensalliance.org/>

Amount: See website

Description: The National Children's Alliance has a Request for proposals to help support the development of CACs and Multidisciplinary Teams. NACA encourages all tribal communities to apply. They can offer FREE technical support to help you with your application.

➤ **Common Wealth Fund**



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The Commonwealth Fund encourages and accepts unsolicited requests on an ongoing basis. The Fund strongly prefers grant applicants to submit letters of inquiry using the online application form. Applicants who choose to submit letters of inquiry by regular mail or fax should provide the information outlined in a two- to three-page document.

They fund:

- **Delivery System Innovation and Improvement**
- **Health Reform Policy**

➤ **Health System Performance Assessment and Tracking**

<http://www.commonwealthfund.org/Grants-and-Programs/Letter-of-Inquiry.aspx>

➤ **Kaboom! Invites Grant Applications to Open Previously Unavailable Playgrounds**

Deadline: **KaBOOM!** is inviting grant applications from communities anywhere in the United States working to establish joint use agreements to re-open playground and recreational facilities previously unavailable due to safety and upkeep concerns. (No specific deadline.)

Amount: Let's Play Land Use grants of \$15,000 and \$30,000 will support creation of joint-use agreements between local governments and school districts that address cost concerns related to safety, vandalism, maintenance, and liability issues to re-open previously unavailable playgrounds and recreational facilities.

The \$15,000 grants will support the opening of at least four playgrounds in cities with populations of less than 100,000 people. The \$30,000 grants will support the opening of at least eight playgrounds in larger communities.

Description: Grants can be used for training and technical assistance, utilities and other building related to the extra use of the facility, legal fees, contract security

services, and marketing campaigns related to the joint-use agreement. Grant recipients must commit to opening the playgrounds within twelve months of the grant decision.

Complete grant application guidelines are available on the KaBOOM! website:

http://kaboom.org/about_kaboom/programs/grants?utm_source=direct&utm_medium=surl

➤ **Meyer Memorial Trust**

Deadline: Monthly (Except January, April and August)

Amount: Range generally from \$40,001 to \$300,000 with grant periods from one to two (and occasionally three) years.

Description: Responsive Grants are awarded for a wide array of activities in the areas of human services, health, affordable housing, community development, conservation and



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environment, public affairs, arts and culture and education. There are two stages of consideration before Responsive Grants are awarded. Initial Inquires are accepted at any time through MMT's online grants application. Applicants that pass initial approval are invited to submit full proposals. The full two-step proposal investigation usually takes five to seven months. <http://www.mmt.org/program/responsive-grants>

➤ **Kellogg Foundation Invites Applications for Programs that Engage Youth and Communities in Learning Opportunities**

Deadline: No Deadline

Amount: No Amount Specified

Description: The W.K. Kellogg Foundation is accepting applications from nonprofit organizations working to promote new ideas about how to engage children and youth in learning and ways to bring together community-based systems that promote learning. The foundation will consider grants in four priority areas: Educated Kids; Healthy Kids; Secure Families; and Civic Engagement.

Educated Kids: To ensure that all children get the development and education they need as a basis for independence and success, the foundation seeks opportunities to invest in early child development (ages zero to eight) leading to reading proficiency by third grade, graduation from high school, and pathways to meaningful employment.

Healthy Kids: The foundation supports programs that work to ensure that all children grow and reach optimal well-being by having access to fresh, healthy food, physical activity, quality health care, and strong family supports.

Secure Families: The foundation supports programs that build economic security for vulnerable children and their families through sustained income and asset accumulation.

Civic Engagement: The foundation partners with organizations committed to inclusion, impact, and innovation in solving public problems and meeting the needs of children and families who are most vulnerable.

See the Kellogg Foundation Web site for eligibility and application guidelines. http://foundationcenter.org/pnd/rfp/rfp_item.jhtml?id=411900024#sth.ash.8WbcfjRk.dpuf

• **W.K. Kellogg Foundation**

Deadline: The Kellogg Foundation does not have any submission deadlines. Grant applications are accepted throughout the year and are reviewed at their headquarters in Battle Creek, Michigan, or in our regional office in Mexico (for submissions focused within their region).

Amount: NO LIMIT (Please read restrictions/What they won't fund.)



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Description: What to Expect Once they receive your completed online application, an automated response, which includes your WKKF reference number, will be sent to you acknowledging its receipt. Their goal is to review your application and email their initial response to you within 45 days. Your grant may be declined or it may be selected for further development.

As part of review process you may be asked to submit your organization's financial reports and/or IRS Form 990. While this information may be required, it is not intended to be the overall determining factor for any funding. You will not be asked to provide any financial reports or detailed budget information during this initial submission. They will only request this information later if needed as part of the proposal development.

If you would like to speak with someone personally, please contact the Central Proposal Processing department at (269) 969-2329. <http://www.wkkf.org/>

✚ **AHRQ Research and Other Activities Relevant to American Indians and Alaska Natives**

<http://www.ahrq.gov/research/findings/factsheets/minority/amindbrf/index.html>

Community Grant Program- WALMART

DEADLINE: The 2016 grant cycle begins Feb. 1, 2016 and the application deadline to apply is Dec. 31, 2016. **Application may be submitted at any time during this funding cycle. Please note that applications will only remain pending in our system for 90 days.**

AMOUNT: Awarded grants range from \$250 to \$2,500.

DESCRIPTION: Through the Community Grant Program, our associates are proud to support the needs of their communities by providing grants to local organizations.

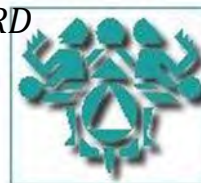
WEBSITE: <http://giving.walmart.com/apply-for-grants/local-giving>

SCHOLARSHIP:

The Meyerhoff Adaptation Project -

The Meyerhoff Scholars Program is open to all high-achieving high school seniors who have an interest in pursuing doctoral study in the sciences or engineering, and who are interested in the advancement of minorities in the sciences and related fields. Students must be nominated for the program and are most typically nominated by their high school administrators, guidance counselors, and teachers. Awards range from \$5,000 – \$22,000 per year for four years.

The Meyerhoff Selection Committee considers students academic performance, standardized test scores, recommendation letters, and commitment to community service. Scholars are selected for their interests in the sciences, engineering, mathematics, or computer science, as well as their plans to pursue a Ph.D. or combined M.D./Ph.D. in the sciences or engineering. Reviewing the freshman class profile may provide an idea of the kinds of students who are admitted to UMBC and the Meyerhoff Scholars Program.



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Applicants are expected to have completed a strong college preparatory program of study from an accredited high school. The minimum program of study should include:

English: four years

Social Science/History: three years

Mathematics*: three years

Science: three years

Language other than English: two years

*Students are strongly recommended to have completed four years of mathematics, including trigonometry, pre-calculus, and/or calculus.

Eligibility Criteria

To be considered for the Meyerhoff Scholars Program, prospective students must have at least a “B” average in high school science or math courses, and many applicants have completed a year or more of calculus. Preference is given to those who have taken advanced placement courses in math and science, have research experience, and have strong references from science or math instructors. In recent years, a strong preference has been given to those students interested in the Ph.D. or M.D./Ph.D. (over the M.D.).

Students must meet all eligibility requirements:

Minimum of 600 on the Math component of the SAT

Cumulative High School GPA of a 3.0 or above

Aspire to obtain a Ph.D. or M.D./Ph.D. in Math, Science, Computer Science, or Engineering

Display commitment to community service

Must be a citizen or permanent resident of the United States

WEBSITE:

<http://meyerhoff.umbc.edu/how-to-apply/benefits-and-eligibility/>

~ONLY FOR WASHINGTON STATE UNIVERSITY~

First Scholars – The Suder Foundation

DEADLINE:

AMOUNT: The goal of the First Scholars program is to help first-generation college students succeed in school, graduate, and have a life complete with self-awareness, success and significance. Scholars receive personalized support, including a four-year renewable scholarship of \$5,000. The program is open to incoming first-time, full-time freshmen whose parents have no more than two years of education beyond high school and no post-secondary degree.



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DESCRIPTION: The First Scholars™ Program is available to incoming first-time, full-time freshmen whose parents have no more than two years of education beyond high school and no post-secondary degree. Participation in First Scholars™ includes a four-year renewable scholarship, half disbursed in the fall semester and half disbursed in the spring semester. Students can receive the award depending on eligibility requirements for a total of 4 years if program requirements are met.

This scholarship is open to Washington residents who enroll at Washington State University - Pullman full-time during the 2016-2017 academic year. The program requires that the recipients live on campus in a specified residence hall for the 2016-2017 academic year, and outside of the family home the following three academic years in order to renew the scholarship.

First-generation students represent a cross-section of America and college campus demographics. First Scholars come from diverse cultural, socioeconomic, geographic and family backgrounds and experiences. First-gen students are found in all departments and colleges of virtually every major public university across the country. Our affiliate universities have an average 30-50% first-gen enrollment and the number keeps rising. However, the average national graduation rate for first-generation students is only 34%, compared with 55% for the general student population.

WEBSITE: <http://firstscholars.wsu.edu/>

Education Award Applications -The American College of Psychiatrists

DEADLINE: June 30

AMOUNT: (SEE WEBSITE)

DESCRIPTION: The Award for Creativity in Psychiatric Education is open to any creative/innovative program for psychiatric education that has been in operation for at least two years, and has been a part of a U.S. or Canadian approved psychiatric residency training program. Trainees may include: medical students, residents, other physicians, allied mental health professionals, or members of the community. The Committee selects an awardee in the fall; all applicants are notified of the Committee's decision by November 15.

WEBSITE: <http://www.acpsych.org/awards/education-award-applications-deadline-december-1>

VETERANS

VFW Accepting Applications From Veterans for Emergency Financial Assistance

DEADLINE: Open

AMOUNT: Grants of up to \$5,000 will be awarded to active and discharged military service members who have been deployed in the last six years and have run into unexpected financial difficulties as a result of deployment or other military-related activity or natural disaster....



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DESCRIPTION: As the nation's largest organization of combat veterans, we understand the challenges veterans, service members and military families can face and believe that experiencing financial difficulties should not be one of them. That's the premise behind the VFW's Unmet Needs program.

Unmet Needs is there to help America's service members who have been deployed in the last six years and have run into unexpected financial difficulties as a result of deployment or other military-related activity. The program provides financial aid of up to \$5,000 to assist with basic life needs in the form of a grant -not a loan- so no repayment is required. To further ease the burden, we pay the creditor directly.

Since the program's inception, Unmet Needs has distributed over \$5 million in assistance to qualified military families, with nearly half of those funds going directly toward basic housing needs.

The needs of our veterans, service members and their families should never go unmet. Let us offer you a hand up when you need it!

Please review the Unmet Needs eligibility criteria to see if you or someone you know qualifies for a grant through the Unmet Needs program.

WEBSITE: http://www.vfw.org/UnmetNeeds/?gclid=CjwKEAiAhPCyBRctwMDS5tzT03gSjADZ8VjRw5Rxlw1br5NTowrY1NFzylowGtdvOagXa3LHyYK_PRoCB4Hw_wcB

RWJF: Submit a Pioneering Idea Brief Proposal - Throughout the year, we welcome Pioneering Ideas Brief Proposals that can help us anticipate the future and consider new and unconventional perspectives and approaches to building a Culture of Health.

DEADLINE: Open

AMOUNT: See site

DESCRIPTION: The goal of the Pioneering Ideas Brief Proposal funding opportunity is to explore; to look into the future and put health first as we design for changes in how we live, learn, work and play; to wade into uncharted territory in order to better understand what new trends, opportunities and breakthrough ideas can enable everyone in America to live the healthiest life possible.

While improving the status quo is vital to the health and well-being of millions of Americans now, the Pioneering Ideas Brief Proposal opportunity reaches beyond incremental changes to explore the ideas and trends that will influence the trajectory and future of health. Ultimately, we support work that will help us learn what a Culture of Health can look like—and how we can get there.

What is a Pioneering Idea?

Good question! We don't want to provide a checklist that limits your thinking—or ours. We do want to give you as clear a picture as we can about the kinds of proposals we hope to see, so you can best assess whether submitting an idea through our Pioneering Ideas Brief



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Proposal process is the right next step for you. Our application form allows you to introduce your idea; if it seems to be a fit for our portfolio we will reach out for more information.

We share some examples below of Pioneering Ideas we have funded in the past to give you a sense of where we've been. Keep in mind that ultimately, we need you to challenge us, and to tell us where we should be going and what ideas have the most potential to transform the way we think about health. As you review the examples below, you may notice some shared themes or characteristics which:

Challenge assumptions or long-held cultural practices.

Take an existing idea and give it a new spin—or a novel application.

Offer a new take or perspective on a long-running, perplexing problem.

Apply cutting-edge ideas from other fields to health.

Explore the potential for emerging trends to impact our ability to build a Culture of Health.

WEBSITE/LINK: http://www.rwjf.org/en/how-we-work/submit-a-proposal.html?rid=CR0RfoW1kVrIxFKudcSYjIL9Zh7yWU63VdhdaVE2UAc&et_cid=639126

IDAHO & WASHINGTON - ONLY

ASPCA Northern Tier Shelter Initiative Coalition Grants

DEADLINE: No Deadline

AMOUNT: Grant amounts will vary depending on project. A site visit may be required as part of the review process or as a condition of receiving the grant funds. Consultation services may be offered as part of a grant package.

DESCRIPTION: Priority will be given to coalitions working toward long-term, systemic, and sustainable community/regional improvements in animal welfare services. This may include (but not limited to) programs that:

Increase capacity to provide quality animal care and services by:



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Improving protocols around vaccination on intake, disease spread prevention, decreased length of stay, physical and behavioral care of sheltered pets

Improving capacity to provide basic health services including spay/neuter and vaccines for animals at risk in the community.

Increase coalition live release rate via:

Fee-waived adoption programs and policies

High-volume adoption events

Foster programs

Relocation initiatives within the seven Northern Tier target states

Decrease shelter intake via:

Lost and found programs

Return to owner in the field

Pet retention assistance, such as safety net programs

Re-homing assistance

WEBSITE: <http://aspcapro.org/grant/2016/05/06/aspcanorthern-tier-shelter-initiative-coalition-grants>

Healthy Native Babies Outreach Stipend Application

DEADLINE: Applications will be accepted on a rolling basis as funds are available.

AMOUNT: \$1500

DESCRIPTION: The Healthy Native Babies Project, a project of the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD), has created culturally appropriate materials with safe infant sleep messages for American Indian and Alaska Native communities. These materials can be tailored for local communities by selecting various photos, graphic designs, and phrases in Native languages from the Healthy Native Babies Project Toolkit Disk. Outreach stipends are available for printing customized outreach materials to disseminate in your community. Recipients must be from one of the following Indian Health Service (IHS) Areas: Alaska, Bemidji, Billings, Great Plains, and Portland. Information on IHS Areas can be found at: <https://www.ihs.gov/locations/>.



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WEBSITE/LINK: <http://files.constantcontact.com/913a319f001/8e50ceae-d3be-462e-be3d-3216455225bc.pdf?ver=1470849886000>

Good Sports Accepting Applications for Sports Equipment **Program**

DEADLINE: *ROLLING FUNDING*

AMOUNT: While the equipment, apparel, and footwear received through the program are free, recipients are expected to pay shipping and handling costs, which amount to roughly 10 percent of the donation value, with a maximum fee of \$1,500.

DESCRIPTION: Good Sports helps lay the foundation for healthy, active lifestyles by providing athletic equipment, footwear, and apparel to disadvantaged young people nationwide. By working closely with teams, coaches, and community leaders across the United States, the organization is able to focus on the respective needs of each individual program and help offset the main factors causing the greatest challenges.

Good Sports is accepting applications from organizations and schools for equipment, apparel, and footwear for a wide range of sports. Organizations that are approved will have access to equipment, apparel, and footwear inventory for a two-year period. During that time, organizations can make up to six separate donation requests — as long as need is well documented, donations will be granted. There is no need to resubmit a full application again during the two-year period.

To be eligible, applicants must directly serve youth between the ages of 3 and 18; serve youth in an economically disadvantaged area; be located in North America (the U.S. and Canada); and operate an organized sport, recreational activity, or fitness program that offers consistent and structured opportunity for play to large groups of children. Schools must apply as a whole; applications for individual programs within a school will not be considered. Donation requests for short-term events such as sports camps and tournaments or to individual athletes will not be considered.

Applications are reviewed on a rolling basis. It is recommended, however, that organizations apply at least eight weeks prior to the start of their particular season or program to ensure the desired equipment can be accessed and shipped on time.

WEBSITE/LINK: <https://www.goodsports.org/apply/>

Good Sports Accepting Applications for **Athletic Equipment Grants**

DEADLINE: *ROLLING FUNDING*

AMOUNT: You will be required to sign a release form and pay a shipping and handling fee with each donation. This will always equal 10% of the total retail value of the items; for example, if the total value of your items equals \$2,000, you will be asked to provide \$200, etc.



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DESCRIPTION: Good Sports in Quincy, Massachusetts, is a nonprofit whose mission is to increase youth participation in sports, recreation, and fitness activities.

To that end, the organization provides sports equipment, apparel, and footwear to youth organizations offering sports, fitness, and recreational programs to youth in need.

To be eligible, organizations must directly serve youth between the ages of 3 and 18 in an economically disadvantaged area; be located in North America (U.S. and Canada); and operate an organized sport, recreational activity, or fitness program that offers consistent and structured opportunity for play to large groups of children. Winning organizations may make up to six equipment requests within a two-year period. Winners will be responsible for operational costs, including equipment shipping, up to \$1,500.

WEBSITE/LINK: <http://www.goodsports.org/apply/>

Voya Foundation Grants

DEADLINE: Grant requests are reviewed throughout the year. Grant applicants should check the online system for quarterly deadlines, which are subject to change.

AMOUNT: Value of grant requests must be a minimum of \$2,500.

DESCRIPTION: The Voya Foundation, the philanthropic arm of Voya Financial, works to ensure that youth are equipped with science, technology, engineering, and math (STEM) expertise and financial knowledge necessary to compete in the twenty-first century workforce and make smart financial decisions that lead to a secure retirement.

To that end, Voya is accepting applications from organizations that provide innovative and experiential K-8 STEM learning opportunities that promote an early interest in STEM career fields and improve teachers' capabilities in STEM; or that provide financial education curriculum to grade 9-12 students focused on navigating major financial milestones such as student debt, credit, home ownership, financial products and services/financial capability, and family needs.

- 1) **STEM Education:** The foundation supports organizations that fund high-quality experiential STEM learning opportunities for children in grades K-8. Programs are evaluated based on improvements in covered STEM concepts and increased interest in STEM careers generated over the course of the program.
- 2) **Financial Literacy:** Voya's financial literacy grants support organizations that provide financial literacy curriculum to students in high school (grades 9-12). Programs must cover student debt, credit, home ownership, investing, and understanding of financial products and services (financial capability), and family financial planning.

To be eligible, applicants must be considered tax exempt under Section 501(c)(3) of the Internal Revenue Code.

WEBSITE/LINK: <http://corporate.voya.com/corporate-responsibility/investing-communities/voya-foundation-grants>

Greetings,

Please see the following grants which are currently available or will be available soon.

[Comprehensive Addiction and Recovery Act: Building Communities of Recovery \(Short Title: BCOR\):](#)

Applications due on July 3, 2017. The purpose of this program is to mobilize resources within and outside of the recovery community to increase the prevalence and quality of long-term recovery support from substance abuse and addiction. These grants are intended to support the development, enhancement, expansion, and delivery of recovery support services (RSS) as well as promotion of and education about recovery.

[Community Facilities Technical Assistance and Training Grant:](#) Applications due on July 24, 2017. The Agency will make grants to public bodies and private nonprofit corporations, (such as States, counties, cities, townships, and incorporated towns and villages, boroughs, authorities, districts, and Indian tribes on Federal and State reservations) to provide associations Technical Assistance and/or training with respect to essential community facilities programs. The Technical Assistance and/or training will assist communities, Indian Tribes, and Nonprofit Corporations to identify and plan for community facility needs that exist in their area. Once those needs have been identified, the Grantee can assist in identifying public and private resources to finance those identified community facility needs.

[Targeted Capacity Expansion: Medication Assisted Treatment - Prescription Drug and Opioid Addiction \(Short Title: MAT-PDOA\):](#) Applications due on July 31, 2017. The purpose of this program is to expand/enhance access to medication-assisted treatment (MAT) services for persons with an opioid use disorder seeking or receiving MAT.

[First Responders – Comprehensive Addiction and Recovery Act Cooperative Agreement \(Short Title: FR-CARA\):](#) Applications due on July 31, 2017. The purpose of this program is to allow first responders and members of other key community sectors to administer a drug or device approved or cleared under the Federal Food, Drug, and Cosmetic Act for emergency treatment of known or suspected opioid overdose.

[Improving Access to Overdose Treatment \(Short Title: OD Treatment Access\):](#) Applications due on July 31, 2017. SAMHSA will award OD Treatment Access funds to a Federally Qualified Health Center (FQHC), Opioid Treatment Program, or practitioner who has a waiver to prescribe buprenorphine to expand

access to Food and Drug Administration (FDA)-approved drugs or devices for emergency treatment of known or suspected opioid overdose. The grantee will partner with other prescribers at the community level to develop best practices for prescribing and co-prescribing FDA-approved overdose reversal drugs.

OMH expects to release a new funding opportunity announcement (FOA): [Empowered Communities for a Healthier Nation Initiative](#). It is anticipated that the FOA will be available on June 1, 2017 with applications due by July 31, 2017 at 5:00 pm ET, and projects to start September 30, 2017. The Empowered Communities for a Healthier Nation Initiative will seek to reduce significant health disparities impacting minorities and disadvantaged populations through the implementation of evidence-based strategies with the greatest potential for impact. The program will serve residents in counties disproportionately impacted by the opioid epidemic; reduce the impact of serious mental illness at the primary care level for children, adolescents and/or adults; and reduce obesity prevalence and disparities in weight status among disadvantaged children and adolescents.

Thanks!

Nicholson (Nicki) J. Massie

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Region 10 serving Alaska, Idaho, Oregon and Washington

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I. TITLE: FEMA Tribal Consultation Policy

II. DATE OF ISSUANCE: 08/12/2014

III. PURPOSE

The Federal Emergency Management Agency (FEMA) is committed to enhancing its relationships with Indian tribes, and to supporting Indian tribes in their preparation for, mitigation of, response to, and recovery from all hazards and disasters. The purpose of this policy is to establish a process to guide FEMA employees on how to engage Indian tribes and Tribal Officials in regular and meaningful consultation and collaboration on actions that have tribal implications.

IV. SCOPE AND EXTERNAL AUDIENCE

This policy applies to all FEMA employees responsible for engaging in consultation and coordination with Tribal Officials and Indian tribes under Executive Order (E.O.) 13175 of November 6, 2000, *Consultation and Coordination with Indian Tribal Governments* and Presidential Memorandum of November 5, 2009, *Tribal Consultation*. It sets forth broad guidelines for enhancing FEMA's consultation and collaboration with Tribal Officials and Indian tribes on actions that have tribal implications as defined in this policy. This policy applies to FEMA actions commenced on or after the date of issuance. FEMA intends to review and update this policy regularly, as necessary, to reflect our ongoing engagement and collaboration with our tribal partners.

V. AUTHORITY

Executive Order 13175 of November 6, 2000, *Consultation and Coordination with Indian Tribal Governments* (65 Fed. Reg. 67249, Nov. 9, 2000); and Presidential Memorandum of November 5, 2009, *Tribal Consultation* (74 Fed. Reg. 57881, Nov. 9, 2009).



VI. BACKGROUND

This policy is issued pursuant to E.O. 13175 of November 6, 2000, *Consultation and Coordination with Indian Tribal Governments* and Presidential Memorandum of November 5, 2009, *Tribal Consultation*, which direct agencies to engage in regular and meaningful consultation and collaboration with Tribal Officials in the development of Federal policies that have tribal implications, and to strengthen the government-to-government relationship between the United States and Indian tribes.

This policy is consistent with the process described in the Department of Homeland Security's Tribal Consultation Policy, and tailors that consultation framework to FEMA's mission. In addition, the guiding principles that define FEMA's commitment to build strong and lasting partnerships with Indian tribes, found in the FEMA Tribal Policy¹ continues to guide any FEMA consultation or coordination with Indian tribes and Tribal Officials.

VII. DEFINITIONS

The following definitions apply for purposes of this policy only:

- a. "Consultation" involves the direct, timely, and interactive involvement of Indian Tribes regarding proposed federal actions on matters that have direct tribal implications. At FEMA, this means the process to communicate and collaborate with Tribal Officials and Indian tribes to exchange information and receive input on an action that has tribal implications.
- b. "Indian tribe or Tribe" means an Indian or Alaska Native Tribe, band, nation, pueblo, village, or community that the Secretary of the Interior acknowledges to exist as an Indian Tribe pursuant to the Federally Recognized Indian Tribe List Act of 1994, 25 U.S.C. §479a.
- c. "Action that has tribal implications" means FEMA regulations, rules, legislative proposals, policies, guidance documents, directives, and other

¹ FEMA Policy 305-111-1 (Dec. 30, 2013).



policy statements that have substantial direct effects on one or more Indian tribes, on the relationship between the Federal Government and Indian tribes, or on the distribution of power and responsibilities between the Federal Government and Indian tribes.

- d. "Tribal Officials" means elected or duly appointed officials of Indian tribal governments or authorized intertribal organizations.

VIII. ROLES AND RESPONSIBILITIES

The following FEMA employees have specific roles and responsibilities in carrying out effective and meaningful consultation through the implementation of this policy. The roles and responsibilities of these FEMA employees reflect the fact that, while oversight and coordination of consultation occurs at FEMA headquarters, as a practical matter, much of the actual consultation activity occurs in FEMA's program and regional offices. The responsibility for initially analyzing the need for consultation and then subsequently carrying it out, resides with these offices.

- a. **The FEMA Administrator.** The Administrator is the official designated to certify to the Office of Management and Budget (OMB) that FEMA complied with E.O. 13175 in a meaningful and timely manner in any draft final regulation that has tribal implications. The Administrator is the official designated to certify to OMB that FEMA complied with all relevant requirements of E.O. 13175 in any proposed legislation that has tribal implications.
- b. **National Tribal Affairs Advisor (NTAA).** The NTAA is the agency's subject matter expert on Indian tribal issues and advises Senior Agency Officials and Tribal Consultation Coordinators on issues related to consultation with Tribal Officials and Indian tribes. The NTAA leads efforts to develop specific training on tribal consultation for FEMA employees that regularly engage in actions that have tribal implications. The training should cover topics such as Indian tribal and Alaska Native cultures and governments, inherent tribal sovereignty, the trust responsibility of the United States, and tribal self-government and self-determination.



- c. Office of External Affairs (OEA).** The Office of External Affairs (OEA) mission is to engage, inform, and educate all FEMA partners in support of FEMA programs and initiatives. To this end, OEA coordinates and maintains visibility on public and internal engagement and communications, and advises FEMA program and support offices on decision-making regarding policies, plans, and actions that affect stakeholder, media, and congressional audiences. In addition, OEA organizes outreach efforts focusing on Indian tribal governments, as well as state, local, and territorial governments, national organizations and associations, the private sector, and the public. The NTAA resides within OEA's Intergovernmental Affairs Division (IGA).
- d. Senior Agency Officials.** Senior Agency Officials are the Associate Administrator, Deputy Administrator, Regional Administrator, Director, or any other official reporting directly to the Administrator, or their designated representative, responsible for all phases of consultation within their respective office. Senior Agency Officials are encouraged to develop a Standard Operating Procedure or Implementation Plan for carrying out the duties outlined in this policy, which tailors the broad concepts in this policy to the specific needs of their respective office.
- e. Tribal Consultation Coordinators (TCCs).** Tribal Consultation Coordinators are designated by a Senior Agency Official to carry out consultation on a specific action for their respective offices, in coordination with the NTAA. TCCs assist Senior Agency Officials to implement this policy in their respective offices. TCCs should be, or receive training to be, familiar with the unique circumstances that affect Indian tribes, the cultural sensitivities that could impact tribal consultation, and the nature of the relationship between Indian tribes and the Federal Government.
- f. Regional Tribal Liaison (RTL).** The Regional Tribal Liaisons are based out of the FEMA Regional Offices and develop close working relationships with the Indian tribal governments in their respective region. RTLs are the first FEMA point of contact for Indian tribal governments and provide technical assistance on FEMA programs. RTLs help Senior Agency Officials, TCCs, and the NTAA



to identify appropriate Tribal Officials to contact for consultation, best methods for notification, and preferred methods of consultation.

- g. Office of Chief Counsel (OCC).** The Office of Chief Counsel assists Senior Agency Officials and TCCs to determine whether consultation is appropriate. OCC provides legal support to Senior Agency Officials and TCCs during the consultation process. The program attorney, in coordination with the Senior Agency Official or TCC, consults with OCC-Regulatory Affairs Division (RAD) for consultation on a matter involving regulations, and with OCC-Chief of Staff for Legal Policy (OCSLP) for consultation on a matter involving legislation.

IX. THE CONSULTATION PROCESS

- a. Overview.** In general, at FEMA, consultation is the process for communicating and collaborating with tribes to exchange information and receive input on actions that have tribal implications. FEMA incorporates the input received from tribes into the decision making process for the action. FEMA is committed to an inclusive and collaborative consultation process for actions that have tribal implications. FEMA offices and regions work to build meaningful relationships with Tribal Officials and Indian tribes. This helps FEMA to identify successfully the capabilities, needs, and interests of affected Indian tribes, and facilitate successful consultation efforts in the future. Consultation at FEMA consists of four phases: Identification, Notification, Input, and Follow-up.
- b. Phase 1: Identification.** Identification occurs in two ways: (1) FEMA identifies an action to consider for consultation; or (2) an Indian tribe or Tribal Official requests FEMA to consider consultation on an action by contacting the NTAA.
 - 1. How to determine whether to conduct consultation on an action.** Regardless of whether FEMA or an Indian tribe highlights an action to consider for consultation, Senior Agency Officials, in coordination with their TCCs, the NTAA, and OCC, follow these steps to determine whether to conduct consultation on an action:



- i. **Does the action have tribal implications?** The Senior Agency Official determines whether the agency action has tribal implications.

(1) **What is an agency action?** An “action” can include, but is not limited to the following FEMA actions related to FEMA programs (such as, response, recovery, preparedness, flood insurance, hazard mitigation, and environmental and historic preservation compliance):

- Regulations or rules,
- Legislative proposals,
- Policies, guidance documents, directives, or other policy statements.

(2) **When is there a tribal implication on an agency action?** There is a “tribal implication” when the action has a substantial direct effect on:

- One or more Indian tribes (for example, FEMA is developing a new policy that applies only to certain Indian tribe(s) in a specific Region),
- The relationship between the Federal Government and Indian tribes (for example, FEMA is developing a regulation that proposes a new way that Indian tribes may seek assistance from FEMA, and this regulation will not change this process for states or local governments), or
- The distribution of power and responsibilities between the Federal Government and Indian tribes (for example, FEMA is developing a new policy that gives Indian tribes the option to operate a grant program on behalf of FEMA, changing the Indian tribe’s power and responsibility over the administration of the federal grant).

The term “substantial direct effect” generally refers to an effect on an Indian tribe(s) that is:



- Directly caused by the FEMA action,
- Beneficial or adverse, and
- Significant.

The Senior Agency Official works with their TCC, the NTAA, and OCC to determine whether the action has tribal implications.

If the Senior Agency Official determines that the FEMA action has tribal implications, then FEMA will consult with the affected Indian tribes in the development of the action that has tribal implications. If the Senior Agency Official determines that the FEMA action does not have tribal implications, then FEMA will include Indian tribes in the outreach for that action that is also conducted with other partners, such as state and local governments.

2. **How to determine which method of consultation to use.** There are various ways to conduct consultation with Indian tribes. Consultation may include, but is not limited to: face-to-face meetings with one or more tribes, regional meetings with several tribes, webinars, and in some circumstances, phone calls, emails, or correspondence.

The Senior Agency Official works in coordination with the TCC, OEA, and the NTAA early in the process to determine suitable method(s) of consultation for the action. The Senior Agency Official considers several factors to determine suitable method(s) of consultation, including:

- The complexity of the FEMA action,
- The number of Indian tribes impacted,
- The scope, scale, and degree of the tribal implications,
- FEMA and tribal time and resource constraints,
- The stated preference of the Indian tribe(s) affected,
- The unique cultural sensitivities of Indian tribes, and
- The technological capabilities of tribes.



To determine the type and extent of engagement, the Senior Agency Official considers the scope, scale, and degree of impact of the action. For example, in the case of a large-scale action, such as a national rulemaking that has a substantial direct effect on several Indian tribes, a more coordinated approach with ongoing engagement, such as a series of meetings in geographically diverse areas with Tribal Officials, may be the most effective method of consultation. For more routine operational matters, a less formal process may be sufficient – such as a phone call, written correspondence, or face-to-face interaction with the Tribal Official from the impacted Indian tribe.

To the fullest extent possible, and considering the preferences of tribal stakeholders, the Senior Agency Official uses existing agency processes and mechanisms to carry out consultation. The Senior Agency Official may, for example, engage with tribes at previously scheduled meetings, or coordinate with tribes to arrange conference calls or meetings just for the purpose of exchanging information and input on the action.

If FEMA and the affected tribe(s) have divergent views about the method of consultation, both parties should make every effort to come to an agreement on a suitable method of consultation, taking into consideration factors such as the tribe's stated preference and possible FEMA resource limitations. The Senior Agency Official or TCC notes in the record of consultation any suggestions for consultation that FEMA was unable to accommodate and why.

Given FEMA's mission, in limited circumstances, it may be necessary to forgo, limit, or postpone consultation if the action is essential to saving lives and protecting and preserving property or public health and safety.

- 3. How to determine whom to consult.** FEMA's responsibility is to consult with Tribal Officials on actions that have tribal implications. The Senior Agency Official works with the TCC, the NTAA, and RTLs to identify the Tribal Official or their duly appointed designee. The duly appointed designee may be any of the following, but is not limited to, the tribe's emergency management or disaster recovery point of contact or subject



matter expert, tribal council members, or employees from a tribe's public works, transportation, health, natural resources, cultural, or other offices.

If an action has a substantial direct effect on one or more Indian tribes, FEMA consults with the Tribal Officials of those Indian tribes. If the action has a substantial direct effect on the relationship between the Federal Government and Indian tribes, on the distribution of power and responsibilities between the Federal Government and Indian tribes, or on Indian tribes throughout the country, then FEMA consults with Tribal Officials of Indian tribes across the nation.

4. **Tribal Consultation Planning Checklist.** Upon a finding that consultation will or will not be conducted, the Senior Agency Official or TCC documents the decision using the Tribal Consultation Planning Checklist in Appendix A. The checklist guides the Senior Agency Officials or TCCs through the consultation decision making process in this policy, including how to determine whether to conduct consultation on an action and if consultation will be conducted, how to determine suitable method(s) of consultation. For actions that have tribal implications, the Senior Agency Official or TCC retains one copy of the checklist in the administrative record for the action, and submits a second copy to the NTAA.
- c. **Phase 2: Notification.** If FEMA intends to conduct consultation on an action, the Senior Agency Official notifies the Tribal Official(s) identified in Phase 1 that consultation will occur. The Senior Agency Official then completes the following steps in an effort to give sufficient notification:
1. **How to determine when consultation should occur.** Consultation should occur early in the decision-making process to allow tribes the opportunity to provide meaningful input and to give FEMA the opportunity to consider the input. Each consultation will be unique so the Senior Agency Official or TCC works in coordination with the NTAA, RTLs, and OEA to determine the best time to begin consultation.
 2. **What notification includes.** Notification includes sufficient information for Tribal Officials to make an informed decision about whether to



participate in consultation and how to provide informed input. Notification also includes an overview of the consultation process, a description of the topic(s) to be discussed, a description of how tribal input will be received and the timeframe for submitting such input, and the contact information for the FEMA employee who can provide any technical assistance, respond to any questions, or provide any clarifications.

3. **How to notify Indian tribes that consultation will occur.** The Senior Agency Official or TCC notifies the affected Tribal Official(s) that FEMA is consulting on an action in the form of a letter, typically from the Administrator. The NTAA maintains contact information of current Tribal Officials of federally recognized Indian tribes and the Senior Agency Official or TCC contacts the NTAA for this information.

The Tribal Official or their designee, such as the tribe's emergency management or disaster recovery point of contact, may have additional preferred methods of notification. Additional methods may include phone calls, emails, publication in relevant media or the *Federal Register*, or notice through other agreed upon means. Senior Agency Officials shall make a reasonable effort to notify the Tribal Official(s) of affected Indian tribe(s) in a manner that will be sensitive to the uniqueness of the affected Indian tribe(s) and to honor any Indian tribal preferences regarding the specific method of contact. The Senior Agency Official or TCC works in coordination with the NTAA and RTLs to determine the best method of notifying the Tribal Official(s) of affected Indian tribe(s). The RTLs assist the Senior Agency Official and TCC to contact Tribal Officials located in each region. The NTAA assists the Senior Agency Official and TCC to contact authorized intertribal organizations, in addition to any affected Indian tribe(s), for issues that have a national impact.

- d. **Phase 3: Input.** In this phase, FEMA receives input from Tribal Officials and Indian tribes on the action. FEMA incorporates the input received into FEMA's decision making process. This phase continues until the Senior Agency Official or TCC finds that there is sufficient input to make an informed decision about the action. Subsequent rounds of input may be necessary if



there are significant changes to the originally proposed action or if new issues arise.

1. **How to arrange the details of the input phase of consultation.** During the input phase of consultation, FEMA receives input from Tribal Officials and Indian tribes by conducting the type of consultation identified in Phase 1. The Senior Agency Official or TCC works in coordination with the NTAA, RTLs, and OEA to determine the logistics for the input phase of consultation by developing a Consultation Plan of Action. This Plan of Action generally includes:

- A budget of consultation expenses (for example, estimated travel expenses for Headquarters (HQ) employees and Regional employees, room and equipment rental, etc.),
- A schedule of planned consultation (for example, the dates, times, and locations of the consultation),
- Details for arranging room rentals, conference calls, or webinars (for example, identify what steps need to be taken to reserve a room or set up a webinar),
- Determine how consultation will be recorded (see section on recordkeeping for more information),
- Explanation of HQ and Regional responsibilities (for example, who is responsible for identifying meeting space, facilitating the consultation, attending the consultation, securing funding, etc.),
- An agenda (for example, call to order, invite prayer or other Native recognition, introduction, roll call, overview, discussion, closing comments, etc.), and
- Other considerations (for example, room set-up for in-person meetings and other issues of protocol when meeting or speaking with Tribal Officials).

During the Identification phase of consultation, the Senior Agency Official or TCC submits the Tribal Consultation Form (Appendix A) to OEA; this form will help OEA arrange the details of the input phase of consultation.



2. The role of FEMA employees during the input phase of consultation.

The purpose of consultation is to receive input from Tribal Officials on FEMA actions that have tribal implications. During this phase, FEMA provides Tribal Officials the opportunity to submit input and discuss their questions and concerns. The consultation is conducted by a Senior Agency Official, the TCC, or another FEMA employee that is familiar with the unique circumstances that affect Indian tribes, the cultural sensitivities that could impact tribal consultation, and the nature of the relationship between Indian tribes and the Federal Government. FEMA employees that participate in consultation should explain the scope of the FEMA action under consideration. FEMA employees should respect that this is time for Tribal Officials to inform FEMA and should actively listen and document their input, but should not comment on, agree with, or disagree with input received from Tribal Officials. The Senior Agency Official, the TCC, or the FEMA employee facilitating the consultation (facilitator) begins the consultation by stating the purpose of the consultation and sets the expectation that in receiving input from Tribal Officials, FEMA is not agreeing to any particular result that may be suggested during the consultation, but rather is there to listen to, receive, and document the input from Tribal Officials, so that FEMA may make informed decisions about the matter.

3. How to address Federal Advisory Committee Act (FACA) requirements.

In accordance with section 204(b) of the *Unfunded Mandates Reform Act of 1995* (2 U.S.C. §1534), the provisions of the *Federal Advisory Committee Act* (5 U.S.C. App.) do not apply to consultations, conducted pursuant to this FEMA Tribal Consultation Policy, with elected officers of tribal governments (or their designated employees with authority to act on their behalf). Participants other than elected officers of tribal governments may be present at the consultation, such as representatives from authorized intertribal organizations. As a result, to ensure compliance with FACA, the facilitator shall make a statement at the beginning of the consultation that FEMA is not soliciting or accepting consensus advice or recommendations on federal laws, regulations, or policies during the meeting. Rather, the purpose of the meeting is to gather individual input from a diverse group of stakeholders. To this end, the facilitator should not steer the



conversation towards consensus, but should ask open-ended questions to solicit individual input and perspectives.

4. **How to document input.** The Senior Agency Official, TCC, or facilitator keeps a record of the input phase of consultation. At the beginning of the consultation, the Senior Agency Official, TCC, or facilitator discusses how the consultation will be documented with the Indian tribe(s) participating. Documentation includes, at a minimum:

- The date and location of the consultation,
- A list of FEMA and Indian tribal participants,
- A summary of the issues discussed, and
- A thorough description of the input and questions received from Tribal Officials and Indian tribes.

Examples of documentation include, but are not limited to, a FEMA note taker, a video or voice recording, a professional transcript, or comments submitted in response to a *Federal Register* Notice.

If FEMA takes notes at the consultation, it may be appropriate to circulate the notes to all tribal participants for review and comment to ensure that the views of tribal participants are accurately captured. If FEMA creates voice or video recordings of the meetings, the facilitator notifies all participants that the meeting will be recorded. The facilitator makes an announcement at the beginning of the meeting that the meeting will be recorded by a specific medium (e.g. voice, video, or other medium) and that continued participation in the recorded meeting will constitute consent to the recording.

- e. **Phase 4: Follow-up.** After FEMA consults with Tribal Officials and Indian Tribes, FEMA considers the input received during the consultation process, and incorporates that input into FEMA's decision making process. FEMA then follows-up with all Tribal Officials and Indian tribes that were engaged in consultation.



1. **When follow-up with Indian tribes occurs.** Once FEMA finalizes the action, the Senior Agency Official or TCC communicates FEMA's decision on the action to Tribal Officials and Indian tribes.
2. **What follow-up with Indian tribes includes.** Follow-up informs Tribal Officials and Indian tribes of the resolution of the FEMA action with tribal implications. Follow-up typically includes: a description of the action that was consulted on, the dates that the consultation occurred, FEMA's decision on the action, and the contact information for a FEMA employee that can provide any technical assistance or respond to any questions. In some instances, follow-up may include a summary of input received or a final product, such as a copy of a final policy.
3. **How to follow-up with Indian tribes.** FEMA typically follows-up with Tribal Officials and Indian tribes in writing to communicate the decision on the action. FEMA may also use a number of other methods for communicating follow-up, including, but not limited to: FEMA's website, background in a policy or the preamble of a rulemaking, letters, email, other forms of correspondence, publication in relevant media or the *Federal Register*, verbal communication, or follow-up through other suitable means.

Senior Agency Officials make a reasonable effort to follow-up with the Tribal Official(s) in a manner that respects any Indian tribal preferences regarding the specific method of contact. The Senior Agency Official or TCC works in coordination with the NTAA and RTLs to determine how to follow-up with the Tribal Official(s).

X. DISCLAIMER

This policy is not intended to and does not create any right to administrative or judicial review or any other right or benefit or trust responsibility, substantive or procedural, enforceable by a party against the United States, its agencies, or instrumentalities, its officers or employees, or any other persons.



XI. RESPONSIBLE OFFICE

The Office of External Affairs, in cooperation with the Office of Chief Counsel, is responsible for reviewing and amending this document.

XII. SUPERSESSION

FEMA does not have another FEMA Tribal Consultation Policy. This policy supersedes all agency policies and guidance on this subject.

XIII. REVIEW DATE

This policy will be reviewed three years from the date of issuance in accordance with Directive 112-12.

A handwritten signature in blue ink, appearing to read "W. Craig Fugate", written over a horizontal line.

W. Craig Fugate
Administrator,
Federal Emergency Management Agency



APPENDIX A

TRIBAL CONSULTATION PLANNING CHECKLIST

Instructions: The purpose of this checklist is to help Senior Agency Officials or Tribal Consultation Coordinators (TCCs) to determine whether to conduct consultation on an action and, if consultation will be conducted, to determine how to carry out the consultation. For regulations, policies, or for actions where consultation is required by law, the Senior Agency Official or TCC retains one copy of this checklist in the administrative record for the action, and submits a second copy to the National Tribal Affairs Advisor (NTAA). Before filling out this checklist, please read the FEMA Tribal Consultation Policy.

1. How to Determine Whether to Conduct Consultation on an Action

Program:

- | | | | |
|---------------|--------------------------|-------------------|--------------------------|
| Response | <input type="checkbox"/> | Preparedness | <input type="checkbox"/> |
| Recovery | <input type="checkbox"/> | Flood Insurance | <input type="checkbox"/> |
| Other (_____) | <input type="checkbox"/> | Hazard Mitigation | <input type="checkbox"/> |

Program Point of Contact (i.e., Senior Agency Official or Tribal Consultation Coordinator): _____

Action:

- | | | | |
|-----------------|--------------------------|------------------------|--------------------------|
| Regulation/Rule | <input type="checkbox"/> | Legislative proposal | <input type="checkbox"/> |
| Policy | <input type="checkbox"/> | Guidance | <input type="checkbox"/> |
| Directive | <input type="checkbox"/> | Other policy statement | <input type="checkbox"/> |

Title of Action: _____



Please answer the following questions to determine whether your action has tribal implications.

A. Tribal Implications. Your action has tribal implications if your action has a substantial direct effect on one or more Indian tribes, the relationship between the Federal Government and Indian tribes, or the distribution of power and responsibilities between the Federal Government and Indian tribes.

Does the action have an effect on:

1. One or more Indian tribes? Yes No
2. The relationship between the Federal Government and Indian tribes? Yes No
3. The distribution of power and responsibilities between the Federal Government and Indian tribes? Yes No

If YES to any of the questions above, is the effect substantial and direct?

1. Yes No N/A
2. Yes No N/A
3. Yes No N/A

If YES or NO, please explain in several sentences why you believe the effect is/is not substantial and direct (i.e., is the effect on tribes directly caused by the FEMA action, either beneficial or adverse, and significant?):



2. Proposed Consultation Approach

If you have determined that you will conduct tribal consultation on your action because it has tribal implications, please fill out this section. If you have determined that you will not conduct tribal consultation for your action, you may leave this section blank.

Senior Agency Official or Tribal Consultation Coordinator Coordinating Consultation: _____

What type of consultation do you plan to utilize (check all that apply):

- | | | | | | |
|-----------------------|--------------------------|-------------------|--------------------------|--------------------------------|--------------------------|
| Phone/Conference Call | <input type="checkbox"/> | Email broadcast | <input type="checkbox"/> | National Conference | <input type="checkbox"/> |
| Face-to-face meetings | <input type="checkbox"/> | Webinar | <input type="checkbox"/> | <i>Federal Register</i> Notice | <input type="checkbox"/> |
| Listening session | <input type="checkbox"/> | Workshop/Training | <input type="checkbox"/> | Other (_____) | <input type="checkbox"/> |

Indian tribes and Tribal Officials to be consulted:

Please list the federally recognized Indian tribe(s) impacted by the action, the Tribal Official (elected or duly appointed officials of Indian tribal government(s)) that will be consulted, and the Tribal Official's Title (i.e., Chief Executive, Governor, Emergency Manager, Tribal Council Member, etc.). Attach additional pages if necessary.

- | | | |
|------------------|------------------|--------|
| 1. Indian Tribe: | Tribal Official: | Title: |
| 2. Indian Tribe: | Tribal Official: | Title: |
| 3. Indian Tribe: | Tribal Official: | Title: |
| 4. Indian Tribe: | Tribal Official: | Title: |
| 5. Indian Tribe: | Tribal Official: | Title: |
| 6. Indian Tribe: | Tribal Official: | Title: |

When would you like consultation to occur: _____

In addition to a letter from the Administrator, check any other methods that you plan to use to notify Tribal Officials of the opportunity to consult:

- | | | | | | |
|--------------------------------|--------------------------|--------------|--------------------------|---------------|--------------------------|
| Email | <input type="checkbox"/> | FEMA Website | <input type="checkbox"/> | Other (_____) | <input type="checkbox"/> |
| <i>Federal Register</i> Notice | <input type="checkbox"/> | Newsletter | <input type="checkbox"/> | | |



How do you plan to document input received during consultation (check all that apply):

- | | | | |
|-------------------------|--------------------------|---|--------------------------|
| FEMA Note-taker | <input type="checkbox"/> | Recording (video or voice) | <input type="checkbox"/> |
| Professional Transcript | <input type="checkbox"/> | Comments Received by <i>Federal Register</i> Notice | <input type="checkbox"/> |
| Other (_____) | <input type="checkbox"/> | | |



You're invited to the

7th Annual THRIVE Youth Conference

***LIMITED SPOTS STILL AVAILABLE!**

Participants will learn about the signs of suicide, healthy relationships, and much more! They will also learn to positively express themselves through four interactive, educational workshop tracks. Sessions will incorporate American Indian/Alaska Native culture, traditional learning strategies, and skill-building activities that educate youth about healthy behaviors.

- Beats Lyrics Leaders (BLL)
- Digital Storytelling
- Science of Healthy Lifestyles (OHSU)
- We R Native Youth Ambassadors

Registration is FREE and ends June 9th, 2017 or when we reach 65 participants!

**Open to American Indian and Alaska Native youth ages 13-19. Maximum of 4 youth per tribe or area can register.*

When

**MONDAY - FRIDAY
June 26-30, 2017**

Where

**PORTLAND
Native American Student Center - Portland State University
710 SW Jackson St, Portland, OR 97201**

Register

Hello –

As you may have heard, there has been a lot of discussion in the national media about the new Netflix miniseries **13 Reasons Why**, possibly increasing suicide risk among youth.

One of our NW Tribes let us adapt a letter that can be shared with parents in your community (see attached). The letter is designed to connect parents with resources around the miniseries and other tools to address suicidality.

Using the Template: Please add your own letterhead and an on-site contact person for parents/adults in your community and circulate as you feel necessary. We hope that this letter can help address some of the questions lingering as a result of the miniseries about suicide prevention. Please do not hesitate to contact me if you have any questions.

Best,

Colbie M. Caughlan, MPH
Suicide Prevention Project Manager - THRIVE
Northwest Portland Area Indian Health Board
2121 SW Broadway, Suite 300
Portland, Oregon 97201
Ph. 503-416-3284
Fax 503-228-8182 or 503-228-4801
ccaughlan@npaihb.org

(Letterhead) Please revise or add to this as you wish, print on letterhead, and then disseminate to parents/guardians.

[Date]

Dear Parents and Guardians:

This letter is to make you aware of the Netflix original series ***13 Reasons Why***.¹ In the miniseries, which is based on a young adult novel, high school student Hannah Baker leaves behind 13 tape recordings detailing why she took her own life.

Watching the miniseries, young people could infer that suicide is a viable, romanticized option. The show's content is extremely graphic, with scenes in each episode that may be difficult for children and young adults to watch and process on their own in a healthy way.

Youth suicide prevention specialists believe the series has the following shortcomings:

- There is no mention of behavioral health and treatment options
- The notion of suicide is glamorized
- There are several scenes depicting serious trauma (including rape, bullying, alcoholism and suicide), in which the teens do not seek help or resources
- The graphic portrayal of Hannah's actual suicide was unnecessary graphic, and potentially harmful to young people facing similar life challenges

Please take a moment to find out if your child has read the book or viewed the series. If so, please use the show as an opportunity to talk about some of its complicated issues and create a safe atmosphere for your child to discuss his or her feelings and emotions. We also urge parents to research the series, to fully understand what your child is being exposed to.

If you would like more information about suicide prevention resources available in our community, you can contact the [tribal/local Behavioral Health Department] at [phone number] or call the Northwest Portland Area Indian Health Board's suicide prevention project, THRIVE, at (503) 228.4185. Other options include calling 911, if you feel your child is in immediate danger of hurting themselves, or the National Suicide Prevention Lifeline at 1-800-273- TALK (8255), and the Crisis Text Line (text "NOW" to 741741).

Included below are several articles that may be of interest, if you would like to learn more about the show and what professionals are saying about it.

Sincerely,

[Name, title, contact information of the team/person circulating this letter to parents]

¹ This letter is provided to raise awareness and address concerns that may be circulating due to the miniseries, and is not a professional opinion on the risks or benefits of the show.

Helpful articles/videos:

For Families of Teens at Suicide Risk, 13 Reasons Raises Concerns, New York Times:

<https://www.nytimes.com/2017/05/01/well/family/for-families-of-teens-at-suicide-risk-13-reasons-triggers-concerns.html?mwrsm=Email&r=1>

13 Reason Why Netflix Series Considerations for Educators, National Association of School Psychologists:

<https://www.nasponline.org/resources-and-publications/resources/school-safety-and-crisis/preventing-youth-suicide/13-reasons-why-netflix-series-considerations-for-educators>

13 Reason Why. Should Parents Be Concerned About This Network Series? Nationwide Children's Hospital:

<http://700childrens.nationwidechildrens.org/13-reasons-parents-concerned-netflix-series/>

13 Reason Why Talking Points, Suicide Awareness Voices of Education:

<https://www.save.org/13-reasons-why/>

A Teachable Moment: Using "13 Reasons Why" to Initiate a Helpful Conversation about Suicide Prevention and Mental Health, American Foundation for Suicide Prevention:

https://www.youtube.com/watch?v=4CC-j73_LnE



COLUMBIA RIVER INTER-TRIBAL FISH COMMISSION

700 NE Multnomah Street, Suite 1200
Portland, Oregon 97232

(503) 238-0667
F (503) 235-4228
www.critfc.org

JOB ANNOUNCEMENT

Formatted: Centered

Position Title: IT Project Leader (Solutions Architect)
Starting Salary: \$85,794 - \$97,233 (CRITFC equivalent to GS13 plus benefits)
Department: Fishery Science
Classification: Full-time, Regular, Exempt
Duration: Term appointment through September 30, 2018, potential for extension based on available funding.
Location: Portland, Oregon
Recruitment Period: June 1 – July 7, 2017

Job Summary:

The Columbia River Inter-Tribal Fish Commission (CRITFC) is seeking an IT Project Leader/Solutions Architect to lead a project dedicated to establishing and improving tribal data management infrastructure, capacity and organization for fish, habitat, and harvest data. Incumbent will lead a team of professionals to assist and support the Tribes and CRITFC in creating and maintaining centralized data management systems, as well as other IT support as needed. Incumbent is expected to work with Data Stewards at each member tribe to provide needs assessments for data flow, organization, and access procedures, as well as evaluate and prepare plans for new technologies. Incumbent must be able to perform all tasks independently, yet function as a member of the evolving data management/IT team to fulfill goals outlined by the Tribes and CRITFC Strategic Plan. The ideal candidate will be organized and possess exceptional leadership, problem solving, communication, and user service skills.

Essential Functions:

- a) Project Administration – lead the Inter Tribal Monitoring Data (ITMD) Project, which includes: the management of Federal Contracts, Grants, and subagreements; creation and management of project budgets; capital and minor purchase of hardware and software; and submit written quarterly and annual progress reports;
- b) Team Leader – supervise and lead a data management/IT team to ensure project goals and deliverables are met. Organize work plans, document data management project workflows, perform annual performance reviews and coordinate meetings related to projects. Collaborate, coordinate, and assist with the work of tribal data stewards, biologists, and data management IT staff;
- c) Establish dialog and respectful relationships with Tribal data collectors and data managers. Identify tribal data and information management needs, including reporting responsibilities;
- d) Infrastructure Development - assess, (re)design, and/or upgrade new and/or existing systems within CRITFC, ITMD Project and the tribes, which includes: Networking

Putting fish back in the rivers and protecting the watersheds where fish live

Systems (firewalls, bandwidth, backup systems); server room Infrastructure (SANs, Hosts, NASs, backup devices); server and database integration (install, configure, maintain ITMD Project server and database services), or supervise contractors to do the same;

Minimum Qualifications:

1. A BS degree in computer science, natural resource field, or the equivalent level of knowledge demonstrated by successful on-the-job performance;
2. Experience leading teams in all aspects of the system development life cycle, including gathering and interpreting user requirements; organizing and leading team meetings; and documenting workflow;
3. Knowledge of biological science and experience with the methods of data collection and data entry;
4. Experience working with federal contracts, grant administration, and managing budgets;
5. Strong technical writing skills and verbal communication;
6. Problem solving and critical thinking skills are essential;
7. Must be very organized and able to develop detailed documentation and manuals on procedures/protocols on design and use of applications, flow diagrams, data entry interfaces for current and future users.

Desired Qualifications:

The following qualifications, although not required, are desirable:

1. A MS degree in a computer science or natural resource field;
2. Understanding of MS SQL Server database administration and development.
3. ASP.NET MVC web application development; C#, JavaScript, Angular.JS, PHP, or another programming language; IIS, and DNS/SSL Deployment.
4. Knowledge of computer security practices and methodologies, particularly with programming and website security;

Supervision Received/Given:

This position reports directly to the Manager of the Fishery Science Department. The incumbent will act as the primary supervisor for up to three Full-time ITMD Project staff and occasional temporary IT staff. This position is responsible for coordinating team schedules, work assignments, performance reviews, and is the primary point of contact for the Nez Perce, Warm Springs, Yakama, and Umatilla tribal data stewards.

Working Conditions:

Most of the work is sedentary and performed in an office setting at the Columbia River Inter Tribal Fish Commission in Portland, OR. However, incumbent is expected to occasionally travel by auto and air to tribal field offices for site visits, installation and maintenance of equipment,

meetings, and training. Employee may occasionally be exposed to inclement weather and uncomfortable work conditions during travel to and from tribal field and research facilities.

Application procedure:

All qualified individuals including women, veterans, minorities and individuals with disabilities are encouraged to apply. Hiring preference will be given to qualified enrolled members of federally recognized tribes and Alaskan Natives, especially to members of the four CRITFC member tribes (Warm Springs, Yakama, Umatilla and Nez Perce).

CRITFC will consider non-U.S. citizen applicants who are authorized to work in the U.S. If not authorized to work in the U.S. CRITFC will provide reasonable support and accommodations to the candidate in obtaining a U.S. work authorization. With the exception of certain employer-required costs, CRITFC will not pay for any costs related to applicant's legal representation, filings for work authorization or immigration, or other fees and costs related to obtaining work authorization or immigration status from the U.S.

CRITFC Motor Vehicle Policy:

The driver operating a CRITFC vehicle or their own private vehicle for business related purposes shall be in possession of a valid, unrestricted current driver's license, or other operator's license, as required by law; and be eligible for coverage under CRITFC's Motor Vehicle insurance policy. Upon request, CRITFC's Motor Vehicle policy is available to applicants to review the required criteria.

If accommodations are needed during the application process, please contact Human Resources.

Incomplete applications will NOT be considered. Complete application materials include a cover letter, CV/resume, a completed job application (available on our website at www.critfc.org "employment opportunities" on bottom left corner, or by calling 503-238-0667), a copy of relevant certifications and at least three professional references. Submit to:

Columbia River Inter-Tribal Fish Commission
Attn: Human Resources
700 NE Multnomah St., Suite 1200
Portland, OR 97232
Email: hr@critfc.org
Fax: 503-235-4228



COLUMBIA RIVER INTER-TRIBAL FISH COMMISSION

700 NE Multnomah Street, Suite 1200
Portland, Oregon 97232

(503) 238-0667
F (503) 235-4228
www.critfc.org

Job Announcement

Job Title: Administrative Assistant
Department: Fishery Science
Classification: Non-Exempt, CRITFC equivalent of GS 7/GS 8 @ 97.5%
Salary: \$40,673 - \$52,870
\$45,044 - \$58,561
Open/Close: 5/22/2017 – 06/30/2017
Location: Portland, OR

Job Summary/Primary Responsibility:

The Fishery Science Department (FSCI) includes over 40 staff members, over 20 projects/cost centers, \$7M in funding, the StreamNet Library, the Hagerman Genetics Lab, Moscow Field Office, La Grande Field Station, Troutdale Storage Unit, Moscow Storage Unit, on-site dry lab, off-site wet lab, three boats, 9 project vehicles and three travel trailers. Additionally, there are many fixed assets that have been procured: scientific research lab and field equipment, guns, servers and sensitive equipment.

The FSCI Administrative Assistant is responsible for tracking department budgets and expenditures and provides management support to the Department Manager and Project Leaders within the FSCI Department. The Administrative Assistant assists FSCI staff to understand and comply with CRITFC financial and operational policies. A large part of each day is spent ensuring smooth information flow (e.g. troubleshooting, problem solving and offering administrative guidance to department staff). The FSCI Administrative Assistant also provides back-up support to other departments when needed. Primary responsibilities include:

- Tracking FSCI cost-centers
- Serving as the control point for purchases, travel requests, ingoing/outgoing mail
- Tracking staff schedules
- Scheduling meetings and taking detailed notes as needed
- Other support services as required by the FSCI Manager

Essential Job Functions:

- Serve as control point for the efficient processing of routine departmental paperwork. Capture and maintain copies of these records in order to ensure accessibility to Department and Project managers. Develop, maintain and continuously improve departmental records management system.

- Track FSCI Department budgets, producing monthly budget status reports, including staff time and expenditures, to project leaders and the FSCI Department Manager.
- Maintain department files for each project and cost center. These shall include but not be limited to: chronological files, contract files and internal memoranda.
- Provide general support services for department staff including, but not limited to word processing, copying, faxing, data entry and mailing.
- Process confidential departmental documents securely and efficiently to insure absolute confidentiality. Maintain secure record management systems for performance evaluations and personnel action documents. Serve as the primary contact regarding contracts and billings between immigration attorneys and CRITFC in matters concerning the immigration or permanent resident status of Department employees, as necessary.
- Insure that items of monetary value are stored in an appropriate secure fashion.
- Assist scientists to plan, schedule, and conduct occasional technical workshops in their subject specialties.
- Provide administrative support to the Commission and other departments as needed and as primary duties permit. These activities include but are not limited to: Commission Meetings; Front Desk coverage; CRITFC hosted conferences; employee morale events; and back-up to Administrative staff.
- Other duties as occasionally assigned by the FSCI Manager.

Required Qualifications:

- Excellent organizational ability. Must be highly motivated and detail oriented. Accuracy and attention to detail are critical.
- Experience with budgeting and fiscal procedures, including purchasing.
- High proficiency with Microsoft Excel, Access or other database software. An Excel proficiency test will be given during interviews.
- Must be able to prioritize activities and schedule his/her time effectively to meet schedules and deadlines.
- Dependable work habits including regular attendance, and punctuality in all matters concerning work and work assignments.
- Good inter-personal skills to work effectively in team situations.

- Education or training beyond high school in biology, computer science, or another field applicable to activities of the Fishery Science Department.

Desired Qualifications:

- Experience with fiscal and management reporting and analysis, which includes reporting tools, statistical analysis and forecasting responsibilities.
- Ability to conduct budget and work flow analyses including: database creation, maintenance and operation, process analysis, streamlining processes, gaining efficiency, continuous improvement.
- Compile financial data from internal and external databases for multiple projects and create annual and multi-year projections of spending and budget status.

Supervision Received:

This position reports to the Fishery Science Department Manager.

Supervision Given:

The Administrative Program Analyst may occasionally train and supervise temporary assistants.

Physical Working Conditions:

Work is primarily performed in an indoor office setting with extended periods at a computer. Physical effort is needed to move, lift and carry office equipment, supplies, files and materials. Basic communication skills such as talking, seeing and hearing are needed for frequent person-to-person contacts and telephone usage. The nature of the work has frequent interruptions; contact with the public and staff requires strong communication skills. Employee may occasionally be required to work beyond normal working hours and to travel offsite, including overnight travel.

CRITFC Motor Vehicle Policy:

The driver operating a CRITFC vehicle or their own private vehicle for business related purposes shall be in possession of a valid, unrestricted current driver's license, or other operator's license, as required by law; and be eligible for coverage under CRITFC's Motor Vehicle insurance policy. Upon request, CRITFC's Motor Vehicle policy is available to applicants to review the required criteria.

Date Revised: May 17, 2017

The IHS TeleBehavioral Health Center of Excellence presents:

FETAL ALCOHOL SPECTRUM DISORDER (FASD) SERIES: Children with Fetal Alcohol Spectrum Disorders: Why Can't We find them?

Presented by Larry Burd, PhD

Dates and Time

June 7, 2017, 1 pm ET, 12 pm CT, 11 am MT, 10 am PT, and 9 am AKT

* Arizona (outside of Navajo Nation) is aligned with the Pacific times listed above due to Daylight Savings. Navajo Nation, you are still aligned with Mountain times above.

Outcomes/Objectives

At the end of this presentation, participants will be able to:

1. Employ a validated screening tool for identification of FASD. The goal is for this tool to be routinely utilized in assessment of children in an academic setting where FASD is a possible concern.
2. Apply intervention strategies designed to improve outcome for children with FASD that can be used in a school/community setting.
3. Describe educational implications of the impairments identified in alcohol related neurodevelopmental disorder.

Target Audience

Educators, Health & Educational Administrators, Nurses, Nurse Practitioners, Counselors, Pharmacists, Pharmacy Technicians, Psychologists, Dentists, Physicians, Physicians Assistants, Social Workers, Allied Health Professionals, Psychiatrists.

Registration

This FREE presentation is open to everyone, and registration is required. To register, please visit: https://ihs.adobeconnect.com/eqzccxo1d8za/event/event_info.html. Then click on "Event Registration" in the upper right corner. There is no cost or travel required and 1 CE, 1 NBCC hours or 1.0 contact hours will be provided for attending this webinar. Details on how to claim the credit will be provided during the presentation.

Teachers please note: this webinar and the two FASD webinars for educators have been approved for 3 Washington State educator clock hours. These professional education hours for teachers are FREE, but to qualify for credit, all webinars must be viewed on the original presentation dates: April 5th, May 3rd and June 7th, and certificates of attendance must be obtained for each one.

NOTE: Per APA guidelines partial credit will not be given, you must attend the entire one hour in order to receive credits.

About the Presenter



Dr. Burd, PhD, is a Professor in the Department of Pediatrics at the University of North Dakota School of Medicine. He is also the Director of the North Dakota Fetal Alcohol Syndrome Center and FAS Clinic. He has evaluated

and developed intervention programs for over 16,000 children with developmental disorders. He has had research sites in 41 countries and 34 Tribal Nations. He has made nearly 500 presentations on the topic of FASD.

Disclosure Statement

The presenter has no financial relationship to this program.

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http://ihs.adobeconnect.com/common/help/en/support/meeting_test.htm

Technical Assistance and Questions

ALB_AO.esupport@ihs.gov

Continuing Education Disclaimers

Behavioral health, 1 CE or 1 NBCC hours



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The University of New Mexico Department of Psychiatry Behavioral Sciences, Division of Community Behavioral Health is approved by the American Psychological Association to sponsor continuing educations for psychologists. The University of New Mexico Department of Psychiatry Behavioral Sciences, Division of Community Behavioral Health maintains responsibility for this program and content.



Continuing Pharmacy Education: The University of New Mexico Continuing Education Program is approved by the Accreditation Council for Pharmacy Education (ACPE) as a provider of continuing pharmaceutical education. UAN 0039-0000-17-022-L04-P has been assigned to this Application based program for Pharmacists. This program provides a total of 1.0 contact hours (0.1 CEUs) of continuing education credit. Partial credit will not be given. You must attend the entire session in addition to completing an online evaluation with-in 1 month of the event date. Certificates are not provided.

URL: <https://unmpharmacyce.org> > Create account if new (NABP ePID# required) > Log-in > click on "Complete Live Activity Evaluations" > locate webinar attended ("Behavioral Health" >> Child and Adolescent: Advanced in Clinical Practice >> Date + Webinar – Fetal Alcohol Spectrum Disorder (FASD) Series: Children with Fetal Alcohol Spectrum Disorders: Why Can't We find them?") > enter access code > verify attendance > answer evaluation questions > receive CPE credit.

Access Code: Provided at the end of Webinar

CE Provider

UNM Dept. of Psychiatry & Behavioral Health, Division of Community Behavioral Health (CBH)
MSC09 5030, 1 UNM, Albuquerque, NM 87131-0001

505-272-6238

TeleBH@salud.unm.edu

For further information please go to our website.

<http://psychiatry.unm.edu/divisions-centers/crcbh/telebehavioral/continuingdbh/index.html>

Recording

All sessions are recorded for those unable to join them real-time. You can access previous recordings at:

<https://www.ihs.gov/telebehavioral/index.cfm/seminararchive/>

Calendar

<https://www.ihs.gov/telebehavioral/index.cfm/seminars/>

TeleBH LISTSERV

To subscribe to this list go to http://www.ihs.gov/listserv/topics/signup/?list_id=144

Slack

Don't forget, join us at slack for discussion, job info, and more. Join by signing up for an invitation here:

<https://www.surveymonkey.com/r/Y33XW97>

Good Morning,

If you missed the kick off webinar, “Overview of Trauma Informed Care and Historical Trauma Informed Care” you can view it again - the webinar was recorded and soon should be archived (please allow some additional time for it to post):

Recording

All sessions are recorded for those unable to join them real-time, however, credit is not available for viewing the recording. You can access previous recordings at:

<https://www.ihs.gov/telebehavioral/index.cfm/seminararchive/>

Please find attached the flyer for this series – the next on will air on June 6th, “Integrating Trauma Informed and Historical Trauma Informed Care in Behavioral Health Interventions with American Indians and Alaska Natives: Part 1”

What is great about this series is that it repeats (each Part 1, 2, and 3) and there are portions specific to different personnel – for behavioral health staff, non-behavioral health staff, supervisors and health care providers (medical).

Kristi Woodard, LICSW
(Colville Tribal Member)
Behavioral Health Consultant
Portland Area Indian Health Service
1414 NW Northrup Street, Suite 800
Portland, Oregon 97209
Office: 503-414-5596
Fax: 503-414-7795

IHS Mission ... to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level.

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Trauma Informed Care Webinar Series

Presented by Jeanne Bereiter, MD, and Maria Brave Heart, PhD

Registration

This presentation is open to everyone, however registration is **required**. To register, use the link next to the date you'd like to attend. Once the page loads, click on the 'Event Registration' link near the top of the page and complete the registration form.

There is no fee to participate in this webinar. Continuing education credits from various disciplines will be provided for attending these webinars. Details on how to claim these credits will be provided during the presentation.

NOTE: Per APA guidelines partial credit will not be given, you must attend the entirety of the presentation in order to receive credits.

Dates, Times, and Topics

All dates below are in 2017

Webinar for Behavioral Health Staff presented by Maria Brave Heart, PhD

All Webinars in this series will last 1 hour and begin at:

12:30 pm Eastern, 11:30 am Central, 10:30 Mountain, 9:30 am Pacific, 8:30 am Alaska

- | | |
|---------|--|
| June 6 | Integrating Trauma Informed and Historical Trauma Informed Care in Behavioral Health Interventions with American Indians and Alaska Natives: Part 1
Register here: https://ihs.adobeconnect.com/epzoque35jip/event/event_info.html |
| July 11 | Integrating Trauma Informed and Historical Trauma Informed Care in Behavioral Health Interventions with American Indians and Alaska Natives: Part 2
Register here: https://ihs.adobeconnect.com/ewc2clgb4e4m/event/event_info.html |
| Aug 8 | Integrating Trauma Informed and Historical Trauma Informed Care in Behavioral Health Interventions with American Indians and Alaska Natives: Part 3
Register here: https://ihs.adobeconnect.com/eognjaz0wtfx/event/event_info.html |
| Aug 29 | Integrating Trauma Informed and Historical Trauma Informed Care in Behavioral Health Interventions with American Indians and Alaska Natives: Part 1 (repeat)
Register here: https://ihs.adobeconnect.com/ekinzc2tn9is/event/event_info.html |
| Sept 19 | Integrating Trauma Informed and Historical Trauma Informed Care in Behavioral Health Interventions with American Indians and Alaska Natives: Part 2 (repeat)
Register here: https://ihs.adobeconnect.com/em15pjf95l3y/event/event_info.html |

- Oct 10 Integrating Trauma Informed and Historical Trauma Informed Care in Behavioral Health Interventions with American Indians and Alaska Natives: Part 3 (repeat)
Register here: https://ihs.adobeconnect.com/e2hbalkfw6th/event/event_info.html

Webinar for Non-Behavioral Health Staff presented by Maria Brave Heart, PhD

All Webinars in this series will last 1 hour and begin at:

12:30 pm Eastern, 11:30 am Central, 10:30 Mountain, 9:30 am Pacific, 8:30 am Alaska

- June 13 Trauma Informed Care and Historical Trauma Informed Care for non-provider staff: Part 1
Register here: https://ihs.adobeconnect.com/evhe1p1xxa4w/event/event_info.html
- July 18 Trauma Informed Care and Historical Trauma Informed Care for non-provider staff: Part 2
Register here: https://ihs.adobeconnect.com/ei609wqprlcm/event/event_info.html
- Sept 5 Trauma Informed Care and Historical Trauma Informed Care for non-provider staff: Part 3
Register here: https://ihs.adobeconnect.com/ehgisihl5h0o/event/event_info.html
- Sept 26 Trauma Informed Care and Historical Trauma Informed Care for non-provider staff: Part 1 (repeat)
Register here: https://ihs.adobeconnect.com/ec2up3b8jbwi/event/event_info.html
- Oct 17 Trauma Informed Care and Historical Trauma Informed Care for non-provider staff: Part 2 (repeat)
Register here: https://ihs.adobeconnect.com/ed1sjk1chfy2/event/event_info.html
- Oct 31 Trauma Informed Care and Historical Trauma Informed Care for non-provider staff: Part 3 (repeat)
Register here: https://ihs.adobeconnect.com/ejsz7vzueifw/event/event_info.html

Webinar for Supervisors presented by Maria Brave Heart, PhD

All Webinars in this series will last 1 hour and begin at:

12:30 pm Eastern, 11:30 am Central, 10:30 Mountain, 9:30 am Pacific, 8:30 am Alaska

- July 12 Trauma Informed Care and Historical Trauma Informed Care for All Staff Who are in a Supervisory Role: Part 1
Register here: https://ihs.adobeconnect.com/egmmwnnsra31/event/event_info.html
- Aug 1 Trauma Informed Care and Historical Trauma Informed Care for All Staff Who are in a Supervisory Role: Part 2
Register here: https://ihs.adobeconnect.com/enl9i6936a8c/event/event_info.html
- Aug 22 Trauma Informed Care and Historical Trauma Informed Care for All Staff Who are in a Supervisory Role: Part 3
Register here: https://ihs.adobeconnect.com/emocelj7vyjj/event/event_info.html

- Sept 12 Trauma Informed Care and Historical Trauma Informed Care for All Staff Who are in a Supervisory Role: Part 1 (repeat)
Register here: https://ihs.adobeconnect.com/eytpe12lvhav/event/event_info.html
- Oct 3 Trauma Informed Care and Historical Trauma Informed Care for All Staff Who are in a Supervisory Role: Part 2 (repeat)
Register here: https://ihs.adobeconnect.com/etqvxf895b5/event/event_info.html
- Oct 24 Trauma Informed Care and Historical Trauma Informed Care for All Staff Who are in a Supervisory Role: Part 3 (repeat)
Register here: https://ihs.adobeconnect.com/ezeyv1vkf23e/event/event_info.html

Health Care Provider Webinars presented by Jeanne Bereiter, MD

Unless otherwise noted, all Webinars in this series will last 1 hour and begin at:

2 pm Eastern, 1 pm Central, 12 pm Mountain, 11 am Pacific, 10 am Alaska

- June 15 Part I in 3 Part Series for Medical Providers: ACES & Why They Matter in Healthcare
Register here: https://ihs.adobeconnect.com/emwy6p5l9hhh/event/event_info.html
- July 6 Part II in 3 Part Series for Medical Providers: Trauma, Attachment, & DSM 5 Diagnoses
Register here: https://ihs.adobeconnect.com/ejqxnbhvguag/event/event_info.html
- Aug 24 Part III in 3 Part Series for Medical Providers: Vicarious Trauma & Burnout in Healthcare Providers and How a Trauma Informed System Can Help
Register here: https://ihs.adobeconnect.com/etsk7iet5wtz/event/event_info.html
- Sept 26 Part I in 3 Part Series for Medical Providers: ACES & Why They Matter in Healthcare (repeat)
Begins at: 4:30 pm Eastern, 3:30 pm Central, 2:30 pm Mountain, 1:30 pm Pacific, 12:30 pm Alaska
Register here: https://ihs.adobeconnect.com/es0vx53ux6cz/event/event_info.html
- Oct 17 Part II in 3 Part Series for Medical Providers: Trauma, Attachment, & DSM 5 Diagnoses (repeat)
Begins at: 4:30 pm Eastern, 3:30 pm Central, 2:30 pm Mountain, 1:30 pm Pacific, 12:30 pm Alaska
Register here: https://ihs.adobeconnect.com/ecpadd2560km/event/event_info.html
- Nov 15 Part III in 3 Part Series for Medical Providers: Vicarious Trauma & Burnout in Healthcare Providers and How a Trauma Informed System Can Help (repeat)
Begins at: 3 pm Eastern, 2 pm Central, 1 pm Mountain, 12 pm Pacific, 11 am Alaska
Register here: https://ihs.adobeconnect.com/emfgz7yqnlli/event/event_info.html

Consultation with Drs. Brave Heart and Bereiter

Case consultation will be available, please visit the registration page for more information.

To register for Case Consultation with Dr. Bereiter for Healthcare Providers, please visit:

<https://www.surveymonkey.com/r/TICCaseConsultationsBereiter>

To register for Case Consultation with Dr. Brave Heart for Behavioral Health Providers, please visit:

<https://www.surveymonkey.com/r/TICCaseConsultationsBraveHeart>

Please note: A maximum of 8 participants will be allowed to register per session.

Case consultations will be conducted via Zoom, please visit the following link for instructions on joining meetings. The connection information will be shared once registration for consultation is confirmed.

<https://support.zoom.us/hc/en-us/articles/201362193-How-Do-I-Join-A-Meeting->

Target Audience

Educators, Health & Educational Administrators, Nurses, Nurse Practitioners, Counselors, Pharmacists, Pharmacy Technicians, Psychologists, Dentists, Physicians, Physicians Assistants, Social Workers, Allied Health Professionals, Psychiatrists.

About the Presenters



Jeanne Bereiter, is a child and adolescent and general psychiatrist and associate professor in the University of New Mexico Department of Psychiatry and Behavioral Sciences, where she works at the Children's Psychiatric Center and the Division of Community Behavioral Health. She completed a psychiatry residency and child and adolescent psychiatry fellowship at the University of New Mexico School of Medicine in Albuquerque, NM, and a family practice residency at Dalhousie University in Halifax, Canada.



Maria Yellow Horse Brave Heart, PhD, LCSW is an Associate Professor of Psychiatry and Behavioral Sciences and Director of Native American and Disparities Research at the University of New Mexico in the Division of Community Behavioral Health. She is a seasoned clinician and provides psychotherapy through the Indian Health Service's Telebehavioral Health Center of Excellence. Previously, she was Associate Professor at Columbia University and the University of Denver. She was also a clinical provider and supervisor at outpatient mental health clinics in reservation and urban areas, including: South Dakota, Colorado, New Mexico, and New York. She is the founding President/Director

of the Takini Network/Institute (previously based in Rapid City, South Dakota), a Native collective devoted to community healing from intergenerational massive group trauma.

Disclosure Statement

The presenters have no financial relationship to this program.

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http://ihs.adobeconnect.com/common/help/en/support/meeting_test.htm

[To view video tutorials on how to connect, audio options, and other Adobe Connect features, click here.](#)

Technical Assistance

ALB_AO.esupport@ihs.gov

Continuing Education Disclaimers

Behavioral health, 1 CE or 1 NBCC hours per hour of participation



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Access Code: Provided at the end of each Webinar



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CE Provider

UNM Dept. of Psychiatry & Behavioral Health, Division of Community Behavioral Health (CBH)

MSC09 5030, 1 UNM, Albuquerque, NM 87131-0001

505-272-6238

TeleBH@salud.unm.edu

For further information please go to our website.

<http://psychiatry.unm.edu/divisions-centers/crcbh/telebehavioral/continuingedbh/index.html>

Medical and Nursing Continuing Education Credit

Medical and Nursing Continuing Education is available for certain presentations, please see flyers the day of the presentation for additional information.

Recording

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<https://www.ihs.gov/telebehavioral/index.cfm/seminararchive/>

Calendar

<https://www.ihs.gov/telebehavioral/index.cfm/seminars/>

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Slack

Don't forget, join us at slack for discussion, job info, and more. Join by signing up for an invitation here:

<https://www.surveymonkey.com/r/Y33XW97>

N C C D P H P
GOOD HEALTH AND WELLNESS IN INDIAN COUNTRY
TRIBAL RESOURCE DIGEST

Welcome to Centers for Disease Control and Prevention’s (CDC) tribal resource digest for the week of May 29, 2017. The purpose of this digest is to help you connect with the tools and resources you may need to do valuable work in your communities.



*California Rural Indian Health Board Resource Meeting
 (ACORNS) Group Photo – April 2017
 Photo courtesy of Janeva Sorenson*

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Request for Photos

Please send any photos of GHWIC work (community gardens, events, team meetings, etc.) to Anisha Quiroz, AQUIROZ@cdc.gov with a short description of the photo.

Announcements

2017 Diabetes in Indian Country Conference

IHS, Tribal, and Urban SDPI grantees, clinicians, and community health providers will:

- LEARN the latest information and earn CME/CE credits*
- NETWORK with other grantees and clinicians
- SHARE best practices
- SHOWCASE their successful work in AI/AN communities

Read more [here](#).

When: **September 19-21, 2017**

Where: **Albuquerque, NM**



Second Annual Conference on Native American Nutrition

Join us for this annual conference that brings together tribal officials, researchers, practitioners, and others to discuss the current state of Indigenous and academic scientific knowledge about Native nutrition and food science, and identify new areas of work. Read more [here](#). Register [here](#).

Call for Presentation Abstracts-Abstracts for oral and poster presentations for the Second Annual Conference on Native American Nutrition must be submitted by 5 p.m. (central) on Friday, June 16, 2017. More info [here](#). Apply for a Conference Scholarship [here](#).

When: **September 18-20, 2017**

Where: **Prior Lake, MN**



2017 AI/AN National Behavioral Health Conference

The AI/AN National Behavioral Health Conference is the premier behavioral health event attracting over 500 Tribal behavioral health experts, public health professionals, federal employees, advocates, researchers and community-based providers. This year's conference theme, "Fostering Resilience through Celebration of Tribal Best Practices" will provide evidenced-based, best, wise, or promising behavioral health practices developed in and for American Indian and Alaska Native (AI/AN) communities. Read more [here](#).

When: **August 15-17, 2017**

Where: **Tulsa, OK**

Incorporating Public Health Skills to Improve Quality of Life: Examples from Native American Food Systems

The Western Region Public Health Training Center (WRPHTC) is hosting its first virtual conference bringing together public health workers, researchers, and educators to discuss and develop the skills needed to tackle disparities in diet-related disease and food access. The goal of the conference is to present and practice strategies in the areas of assessment, policy development, and assurance that can promote the development of local food systems and improve community health, particularly on tribal lands.

The conference will include presentations on selecting outcome measures for program planning and evaluation, policy development and advocacy, asset building and fiscal management, and creating sustainable food systems. Skill-building workshops will also be used to practice skills such as using logic models, writing policy briefs, and developing a program budget. Read more [here](#).

When: **August 22-24, 2017**

Funding Opportunities

Corbell Scholarship Fund Reaches \$60 Million

Both Merit-based and Need-based, the competitive Cobell Scholarship is annual, non-renewable, and available to any post-secondary (after high school) student who is: an enrolled member of a US Federally-Recognized Tribe, enrolled in full-time study and is degree-seeking. Applicants must plan to attend or be attending any nationally, regionally and industry accredited non-profit, public and private, institution. Applicants must be pursuing a vocational certificate or diploma, associate's, bachelor's, master's, doctoral or professional degree, or certificate. Read more [here](#). And [here](#).



Empowered Communities for a Healthier Nation Initiative

The Empowered Communities for a Healthier Nation Initiative will seek to reduce significant health disparities impacting minorities and disadvantaged populations through the implementation of evidence-based strategies with the greatest potential for impact. The program will serve residents in counties disproportionately impacted by the opioid epidemic; reduce the impact of serious mental illness at the primary care level for children, adolescents and/or adults; and reduce obesity prevalence and disparities in weight status among disadvantaged children and adolescents. Read more [here](#).

Deadline: **July 31, 2017**

YAN Grand Opening

Contributed by Madison Fulton

The Yavapai – Apache Nation (hereafter referred to as YAN), located in Camp Verde, Arizona, is one of thirteen Tribes that the Inter Tribal Council of Arizona, Inc. works with on the GHWIC Project. Linda Rocha, Diné (Navajo), lives and works in YAN as the Community Wellness Manager and is the GHWIC Site Coordinator. The YAN Community Health Coalition (hereafter referred to as CHC) selected three of the seven prevention areas; one of their selections is prevention area number two, “Increase access to healthy foods and beverages.” Implementing a community garden is one initiative to “increase access to healthy

foods and beverages.” The CHC partnered and collaborated with several YAN departments to revitalize a community garden, which belongs to the family of Dorothy and Wesley White, to utilize for gardening demonstrations and classes to the day care students and interested community members. Additionally, the CHC was awarded a grant from Seeds of Native Health to initiate seed saving. So, the garden will also be used to start a seed bank. The following helped the CHC to revitalize the community garden: community members, Diabetes Prevention, Community Health Representatives, YAN Agriculture, YAN Sand & Rock, YAN Public Works, YAN Housing Authority, Food Bank, Public Recreation, Phoenix Indian Medical Center, and Inter Tribal Council of Arizona, Inc. Due to the continued dedication of the CHC for a healthy enriched community, the CHC hosted a grand opening of the community garden on April 21, 2017.



Webinar

The Surgeon General's Report on E-Cigarette Use Among Youth and Adults

At the end of this presentation, participants will be able to:

1. Describe patterns of e-cigarette use among U.S. youth and adults.
2. Discuss Examine potential health risks and benefits of e-cigarettes at the individual and population levels.
3. List Implement national and sub-national public health interventions that can be implemented related to reduce e-cigarette use among youth and adults.

Read more [here](#). Register [here](#).

When: **June 8, 2017, 3-4pm EST**

Contact Information

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<http://www.cdc.gov/chronicdisease/index.htm>

The digest serves as your personal guide to repositories of open and free resources where you can find content to enrich your program or your professional growth. Please note that CDC does not endorse any materials or websites not directly linked from the CDC website. Links to non-Federal organizations found in this digest are provided solely as a courtesy. CDC is not responsible for the content of the individual organization web pages found at these links.

If you have comments or suggestions about this weekly update, please email Anisha Quiroz at AQUIROZ@cdc.gov with the words “TRIBAL DIGEST” in the subject line. 3